| Fill in this information to identify your | case: | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for th | | |
| Case number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is ar amended filing |
| Official Form 101 | | |
| Voluntary Petition | for Individuals Filing for Bank | ruptcy |
| | ebtor 1 to refer to a debtor filing alone. A married couple may | |

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your | Clifton First name | First name |
| | driver's license or passport). Bring your picture identification | Monroe Middle name Mitchell | Middle name |
| | to your meeting with the trustee. | Last name | Last name |
| | | Suffix (Sr., Jr, II, III) | Suffix (Sr., Jr, II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden | First name | First name |
| | names. | Middle name | Middle name |
| | | Last name | Last name |
| | | | |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| | | | |
| 3. | Only the last 4 digits of your Social Security number or | xxx - xx - <u>5</u> <u>9</u> <u>9</u> <u>2</u> | xxx - xx |
| | federal Individual Taxpayer | OR | OR |
| | Identification number (ITIN) | 9xx - xx | 9xx - xx |

06/22

| Debtor 1 | | ifton | Monroe Mitchell | | Case number (if known) | | | |
|----------|---|----------------------------|---|---|----------------------------|---|----------------|----------|
| | Fin | rst Name | Middle Name | Last Name | | , | | |
| | | | About Debtor 1: | | | About Debtor 2 (Spouse Only | / in a Joint (| Case): |
| 4. | Any business n Employer Ident Numbers (EIN) | ification you have used | ☑I have not used a | ny business names or | ness names or EINs. | | | r EINs. |
| | Include trade nambusiness as nam | mes and doing | Business name | | Business name | | | |
| | 240200 404 | | Business name | | | Business name | | |
| | | | | . — — — - | _ | EIN — — — | - — — | _ |
| | | | EIN | | | EIN | - — — | _ |
| 5. | 5. Where you live | | | | | If Debtor 2 lives at a different | address: | |
| | | | Casa Bonita 4A, Pl | laya Bonita | | | | |
| | | | Number Street | | | Number Street | | |
| | | | | | | | | |
| | | | Arraijan, Republic | of Panama, | | | | |
| | | | City | State | ZIP Code | City | State | ZIP Code |
| | | | County | | | County | | |
| | | | | ess is different from that the court will send address. | | If Debtor 2's mailing address it in here. Note that the court of at this mailing address. | | |
| | | | 10722 River Planta | ntion Dr | | | | |
| | | | Number Street | | | Number Street | | |
| | | | P.O. Box | | | P.O. Box | | |
| | | | Austin, TX 78747-1 | 481 | | | | |
| | | | City | State | ZIP Code | City | State | ZIP Code |
| 6. | Why you are ch | | Check one: | | | Check one: | | |
| | district to file fo | or bankruptcy | Over the last 18 have lived in this district. | 0 days before filing this s district longer than in | s petition, I any other | Over the last 180 days be have lived in this district lo district. | | |
| | | | I have another re (See 28 U.S.C. | | | I have another reason. Ex (See 28 U.S.C. § 1408) | plain. | |
| | | | Debtor curren | ntly lives in Panama. L | ast residence | | | |
| | | | in the United | States was 10306 Bro | omflower Dr., | | | |
| | | | Austin, TX 78 | 739. | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Deb | tor 1 Clifton | Mo | nroe | Mitchell | Cas | se number (if known) | | | |
|--|---|-------------------------|---|--|---------------|-------------------------------------|--|--|--|
| | First Nan | ne Mic | ldle Name | Last Name | | , | | | |
| | | | | | | | | | |
| Par | t 2: Tell the Court | About Your F | Bankruptov Ca | ase | | | | | |
| | t El Ton the count | , 1,5001 1001 2 | aaptoy oc | | | | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. ✓ Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | | | | |
| | | | | | | | | | |
| 8. | How you will pay the | | details about he check, or mone a credit card or large to pay the company of the | pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more is about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's k, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with dit card or check with a pre-printed address. If you choose this option, sign and attach the <i>Application for Individuals by The Filing Fee in Installments</i> (Official Form 103A). Lest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a emay, but is not required to, waive your fee, and may do so only if your income is less than 150% of the all poverty line that applies to your family size and you are unable to pay the fee in installments). If you se this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form b) and file it with your petition. | | | | | |
| | | | | | | | | | |
| 9. | Have you filed for ba | nkruntov 🗹 | No. | | | | | | |
| ٥. | within the last 8 year | e2 | | | | | | | |
| | · | Ш | Yes. District | | When | Case number | | | |
| | | | | | MM / DD / Y | YYY | | | |
| | | | District | | Whon | Case number | | | |
| | | | District | | | | | | |
| | | | | | MM / DD / Y | YYY | | | |
| | | | District | | When | Case number | | | |
| | | | | | MM / DD / Y | YYY | | | |
| | | | | | | | | | |
| 10. | Are any bankruptcy pending or being file spouse who is not fi case with you, or by business partner, or | d by a ing this a | | | | Case number, if known | | | |
| | affiliate? | | | | MM / DD / YYY | Υ | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | | | | | | | |
| | | | District | | | Case number, if known | | | |
| | | | | | MM / DD / YYY | Υ | | | |
| | | | | | | | | | |
| 11. | Do you rent your res | idence? 🗹 | ☐ No. 0 | landlord obtained an e Go to line 12. Fill out <i>Initial Statemen</i> | | Against You (Form 101A) and file it | | | |
| | | | as pa | art of this bankruptcy pe | etition. | | | | |

| Debtor 1 <u>Clifton</u> | | Mon | roe | Mitchell | | _ | Case number (if known) | | |
|--|---|---------------|---|--|-------------------------------|------------------------------------|---|-------------------|--|
| | First Name | Midd | lle Name | Last Name | | | , , | | |
| Par | t 3: Report About Any B | usinesse | es You Owr | n as a Sole Propriet | or | | | | |
| 12. | Are you a sole proprietor o | ıf 🗹 | No. Go to Pa | art 4. | | | | | |
| | any full- or part-time business? | | Yes. Name a | and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separ- legal entity such as a | | Name of busin | ness, if any | | | | | |
| | corporation, partnership, or L | LC. | Number | Street | | | | | |
| | If you have more than one so proprietorship, use a separat sheet and attach it to this | | | | | | | | |
| | petition. | | City | | | State | ZIP Code | | |
| | | | Check the ap | ppropriate box to descri | be your busin | ess: | | | |
| | | | ☐ Health C | Care Business (as define | ed in 11 U.S.C | C. § 101(27 | 7A)) | | |
| | | | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | | |
| | | | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | | | |
| | | | ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | | | |
| | | | ☐ None of the above | | | | | | |
| 13. Are you filing under Chapte 11 of the Bankruptcy Code, and are you a small busines debtor or a debtor as define by 11 U.S. C. § 1182(1)? | | process debt | ceed under So tor or you are perations, cas | Subchapter V so that it can be choosing to proceed up | an set approp nder Subchap | o <i>riate dead</i> oter V, you | you are a small business debtor or a debtor collines. If you indicate that you are a small busing must attach your most recent balance sheet, ro or if any of these documents do not exist, for | ness statement | |
| | For a definition of small busin | ness ଏ | No. I am | n not filing under Chapte | er 11. | | | | |
| | debtor, see 11 U.S.C. § 101(51D). | | | n filing under Chapter 11 skruptcy Code. | , but I am NC |)T a small | business debtor according to the definition in | the | |
| | | | | | | | debtor according to the definition in the under Subchapter V of Chapter 11. | | |
| | | | | n filing under Chapter 11 de, and I choose to proce | | | ng to the definition in § 1182(1) of the Bankrup / of Chapter 11. | tcy | |

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| Debtor 1 | Clifton | Monroe | Mitchell | Case number (if known) |
|----------------------|---|----------------|------------------------|---|
| | First Name | Middle Name | Last Name | ` ' |
| D | t 16 \/ O 1 l - | | d D | Anna Danna anta That Near da Lagra adhata Attantian |
| art 4: Rep | oort if You Own or Ha | ave Any Hazaro | lous Property or | Any Property That Needs Immediate Attention |
| 14. Do you | own or have any | ☑ No. | | |
| | that poses or is to pose a threat of | Yes. Wha | t is the hazard? | |
| imminer | nt and identifiable | | | |
| safety? | o public health or Or do you own any | | | |
| property attentio | that needs immediate | If im | mediate attention is r | needed, why is it needed? |
| | nple, do you own | | | |
| | le goods, or livestock t be fed, or a building | | | |
| that need | ds urgent repairs? | | | |
| | | Whe | re is the property? | |
| | | | | Number Street |
| | | | | |
| | | | | City State ZIP Code |

| | irst Name Your Efforts to | | ddle Name | Last Name | | | | | | |
|-------------------------------------|---|-----------------|--|--|--|---------------------|--|---|---|--|
| 15. Tell the court have received | Your Efforts to | Rec | seive a Briefin | | | | | | | |
| 15. Tell the court have received | Your Efforts to | Rec | ceive a Briefin | | | | | | | |
| have received | | | cive a bileiii | g About Credit Counselin | g | | | | | |
| | a briefing | About Debtor 1: | | | | | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| The law require | requires that you a briefing about credit ng before you file for cy. You must truthfully se of the following If you cannot do so, not eligible to file. | You | ı must check one: | | | You must check one: | | | | |
| counseling before bankruptcy. Yo | | ₫ | agency within the | ing from an approved credit counse e 180 days before I filed this bankru ceived a certificate of completion. | | | agency within th | fing from an approved credit counseling ne 180 days before I filed this bankruptcy eccived a certificate of completion. | | |
| choices. If you | | | Attach a copy of t | the certificate and the payment planed with the agency. | , if any, | | Attach a copy of | the certificate and the payment plan, if any, ed with the agency. | | |
| | nyway, the court s your case, you will yer filing fee you | | agency within the | ing from an approved credit counso e 180 days before I filed this bankru not have a certificate of completion | uptcy | | agency within th | fing from an approved credit counseling ne 180 days before I filed this bankruptcy not have a certificate of completion. | | |
| paid, and your begin collection | creditors can | | | ter you file this bankruptcy petition, of the certificate and payment plan, | | | | ofter you file this bankruptcy petition, you yof the certificate and payment plan, if any. | | |
| again. | gain. | | approved agency during the 7 days | ed for credit counseling services for the distribution of the dis | ervices ent | | approved agence during the 7 day | ked for credit counseling services from an y, but was unable to obtain those services is after I made my request, and exigent merit a 30-day temporary waiver of the | | |
| | | | attach a separate obtain the briefing | ay temporary waiver of the requirem sheet explaining what efforts you mg, why you were unable to obtain it be ruptcy, and what exigent circumstane this case. | nade to pefore | | attach a separate obtain the briefin | lay temporary waiver of the requirement, e sheet explaining what efforts you made to eg, why you were unable to obtain it before kruptcy, and what exigent circumstances ile this case. | | |
| | | | | | e dismissed if the court is dissatisfie not receiving a briefing before you f | | | | be dismissed if the court is dissatisfied with r not receiving a briefing before you filed for | |
| | | | receive a briefing You must file a co with a copy of the | isfied with your reasons, you must s g within 30 days after you file. ertificate from the approved agency, e payment plan you developed, if ar ur case may be dismissed. | , along | | receive a briefin You must file a c with a copy of th | tisfied with your reasons, you must still g within 30 days after you file. certificate from the approved agency, along ne payment plan you developed, if any. If you our case may be dismissed. | | |
| | | | | the 30-day deadline is granted only ted to a maximum of 15 days. | / for | | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | | | |
| | | | I am not required counseling beca | to receive a briefing about credit use of: | | | I am not require counseling beca | d to receive a briefing about credit ause of: | | |
| | | | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapabl realizing or making rational decisio about finances. | le of | | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | |
| | | | Disability. | My physical disability causes me to unable to participate in a briefing ir person, by phone, or through the internet, even after I reasonably tri do so. | n | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | |
| | | | Active duty. | I am currently on active military dut a military combat zone. | ty in | | ☐ Active duty | y. I am currently on active military duty in a military combat zone. | | |
| | | | | u are not required to receive a briefinseling, you must file a motion for ware with the court. | • | | | ou are not required to receive a briefing inseling, you must file a motion for waiver of g with the court. | | |

| Debt | tor 1 | Clifton First Name | Monroe Middle N | | | Case nu | umber | (if known) |
|------|---|--|---|--|-------------------------------------|--|---|--|
| | | | | | | | | |
| Par | t 6: Answe | r These Question | s for Re | Reporting Purposes | | | | |
| 16. | What kind o have? | f debts do you | 16a. | | | er debts? Consumer debts are de for a personal, family, or househol | | |
| | | | 16b. | | | s debts? Business debts are debts ough the operation of the business | | |
| | | | 16c. | State the type of debts you ow | e th | at are not consumer debts or busi | ness d | ebts. |
| 17. | Are you filin | g under Chapter 7? | | No. I am not filing under Cha | pter | 7. Go to line 18. | | |
| | exempt prop and adminis paid that fur | nate that after any perty is excluded trative expenses ar nds will be available ion to unsecured | | | | Do you estimate that after any exe paid that funds will be available to | | |
| 18. | How many c | reditors do you t you owe? | 3 | 1-49 50-99 100-199 200-999 1,000-5,000 5,001-10,000 10,001-25,00 | | 25,001-50,000 50,000 |)-100,0 | 000 |
| 19. | How much c assets to be | do you estimate you worth? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | How much o | do you estimate yoι be? | ır | * - * / | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Par | t 7: Sign Be | elow | | | | | | |
| For | you | If I have States C If no attr have ob I reques I unders bankrup and 357 | chosen to Code. I ur orney rep tained ar it relief in itand mal itcy case 1. | to file under Chapter 7, I am aw inderstand the relief available un presents me and I did not pay or not read the notice required by 1 in accordance with the chapter of aking a false statement, concealing can result in fines up to \$250,0 | rare ider rag 1 U title | each chapter, and I choose to pro ree to pay someone who is not an .S.C. § 342(b). e 11, United States Code, specified property, or obtaining money or pro | ler Cha ceed u attornation d in this | apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I spetition. |
| | | C | lifton Mo | on Monroe Mitchell onroe Mitchell, Debtor 1 | | | | |
| | | Е | xecuted o | on <u>06/30/2022</u> MM/ DD/ YYYY | | | | |

| Debtor 1 | Clifton | Monroe | Mitchell | Case number (if known) |
|---|------------|---|---|--|
| | First Name | Middle Name | Last Name | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | | proceed under each chapter f 11 U.S.C. § 34 | Chapter 7, 11, 12, or 13 or or which the person is eliging 2(b) and, in a case in which | this petition, declare that I have informed the debtor(s) about eligibility to f title 11, United States Code, and have explained the relief available under ible. I also certify that I have delivered to the debtor(s) the notice required by th § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry I with the petition is incorrect. |
| | | Y (2/18/24) | -1 D | Data 00/00/0000 |
| | | | el Baumer of Attorney for Debtor | Date <u>06/30/2022</u> |
| | | Printed na Law Office Firm name P.O. Box Number | e of Michael Baumer | |
| | | Liberty H | ill | TX 78642-1818 |
| | | City | | State ZIP Code |
| | | Contact ph | none <u>(512) 476-8707</u> | Email address Michael@baumerlaw.com |
| | | 01931920 |) | <u>TX</u> |
| | | Bar numbe | er | State |

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| 22 104 | 10 tilla D00//1 | | 30/30/22 Entered 00/30/22 10:0 | 2.20 Maii Bocaine | int i g 5 51 66 |
|--|-------------------------------|---------------------|---|---------------------------------------|---|
| Fill in this informatio | n to identify your case | and this fili | ing: | | |
| Debtor 1 | Clifton First Name | Monroe Middle Na | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Na | ame Last Name | | |
| United States Bank | cruptcy Court for the: | | Western District of Texas | | Check if this is an amended filing |
| Official Form | <u>n 106A/B</u> A/B: Prope | rty | | | 12/15 |
| nformation. If more s Answer every questi | space is needed, atta on. | ch a separa | possible. If two married people are filing toget the sheet to this form. On the top of any addition Land, or Other Real Estate You Own or | nal pages, write your name a | |
| ☑ No. Go to Pa | | itable intere | est in any residence, building, land, or similar p | property? | |
| Street addre | ess, if available, or other o | description | What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building | | ims or exemptions. Put the aims on Schedule D: Creditors d by Property. |
| | | | ☐ Condominium or cooperative☐ Manufactured or mobile home | Current value of the entire property? | Current value of the portion you own? |
| City | State | | ☐ Land☐ Investment property☐ Timeshare | | your ownership interest nancy by the entireties, or a |
| County | | | Other Who has an interest in the property? Check one | life estate), if known. | |
| | | | ☐ Debtor 1 only ☐ Debtor 2 only | Check if this is com | munity property |

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 and Debtor 2 only

property identification number: __

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....

☐ At least one of the debtors and another

Other information you wish to add about this item, such as local

(see instructions)

\$0.00

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| Debtor | 1 <u>Clifton</u> | Monroe | Mitchell | Case number (if known) | |
|-------------------------|----------------------------|--------------------------|--|---|---|
| | First Name | Middle Name | Last Name | | |
| | | | | | |
| Part 2 | Describe Your Vel | hiclos | | | |
| ail Z | Describe rour ver | licies | | | |
| | | | | | |
| Oo you | own, lease, or have leg | al or equitable inter | est in any vehicles, whether they are registered or | not? Include any vehicles | |
| ou ow | n that someone else driv | es. If you lease a ve | hicle, also report it on Schedule G: Executory Cont | racts and Unexpired Leases. | |
| 3. Ca ı | rs, vans, trucks, tractors | s apart utility vahial | os materavales | | |
| | No | s, sport utility veriich | es, motorcycles | | |
| | Yes | | | | |
| _ | | | | | |
| 3.1 | Make: | Hyundai | Who has an interest in the property? Check one. | Do not deduct secured claim | |
| | Model: | Tucson | Debtor 1 only | amount of any secured claim Who Have Claims Secured | ns on Schedule D: Creditors by Property. |
| | | 2010 | Debtor 2 only | Current value of the | Current value of the |
| | Year: | 2010 | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire property? | portion you own? |
| | Approximate mileage: | 91000 | At least one of the deptors and another | \$9,725.00 | \$9,725.00 |
| | Other information: | | ☑ Check if this is community property | | |
| | sole management com | nmunity property | (see instructions) | | |
| | colo management con | | | | |
| | | | | | |
| | | | | | |
| If vo | u own or have more thar | one, list here: | | | |
| | | | NAME | | |
| 3.2 | Make: | Vespa | Who has an interest in the property? Check one. | Do not deduct secured clain | ns or exemptions. Put the ns on Schedule D: Creditors |
| | Model: | PX150 | ☐ Debtor 1 only ☐ Debtor 2 only | Who Have Claims Secured | |
| | | 2009 | Debtor 1 and Debtor 2 only | Current value of the | Current value of the |
| | Year: | | At least one of the debtors and another | entire property? | portion you own? |
| | Approximate mileage: | | | \$3,000.00 | \$0.00 |
| | Other information: | | ☐ Check if this is community property | | |
| | nonfiling spouse - sepa | arate property | (see instructions) | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 1 W | ateroraft aircraft motor | homes ATVs and o | ther recreational vehicles, other vehicles, and acc | rassorias | |
| | | | ercraft, fishing vessels, snowmobiles, motorcycle a | | |
| \checkmark | No | | | | |
| | Yes | | | | |
| 5. A c | dd the dollar value of the | e nortion you own fo | or all of your entries from Part 2, including any ent | ries for nages | |
| | | • | er hereg and the state of | . • | \$9,725.00 |
| | | | | | |
| | | | | | |
| Part 3 | Describe Your Per | rsonal and House | ehold Items | | |
| Do wa | u even er heve env legel | l er egyiteble interes | t in any of the fellowing items? | | Current value of the |
| Бо уо | u own or nave any legal | or equitable interes | t in any of the following items? | | Current value of the portion you own? |
| | | | | | Do not deduct secured |
| | | | | | claims or exemptions. |
| 6. Ho | usehold goods and furn | ishings | | | |
| Exa | amples: Major appliance | es, furniture, linens, d | china, kitchenware | | |
| | No | Can Attack of | | | 1 |
| $\overline{\mathbf{A}}$ | Yes. Describe | See Attached. | | | \$4,720.00 |

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| Deb | tor 1 | Clifton | Monroe | Mitchell | Case number (if known) | |
|-----|--------------|---|------------------------------|---|---|------------|
| | | First Name | Middle Name | Last Name | | |
| | | | | | | |
| 7 | Electronics | | | | | |
| ۲. | | | Lradias: audia vidas atars | on and digital aguinment: as | moutore printers compare: music | |
| | Examples. | | | eo, and digital equipment, co ell phones, cameras, media | mputers, printers, scanners; music players, games | |
| | ☐ No | • | | | | |
| | - ⊀ | scribe | See Attached. | | | \$500.00 |
| | — 100. D0 | 301100 | | | | |
| | | | | | | |
| 8. | Collectibles | s of value | | | | |
| | Examples: | | | or other artwork, books, pictu | | |
| | — | stamp, coin, or | baseball card collections; | other collections, memorabil | ia, collectibles | |
| | ☑ No | | | | | |
| | ☐ Yes. De | scribe | | | | |
| | | | | | | |
| 9. | Equipment | for sports and I | hobbies | | | |
| | Examples: | | | | pool tables, golf clubs, skis; canoes and | |
| | | kayaks; carpen | try tools; musical instrume | nts | | |
| | ☐ No | | sporting goods | | | \$1,000.00 |
| | Yes. De | scribe | oporting goods | | | ψ1,000.00 |
| | | | | | | |
| 10. | Firearms | | | | | |
| | | : Pistols, rifles, | shotguns, ammunition, and | d related equipment | | |
| | ☐ No | , | _ | | | |
| | | escribe | See Attached. | | | \$400.00 |
| | | | | | | |
| | | | | | | |
| 11. | Clothes | | | | | |
| | | : Everyday cloti | nes, furs, leather coats, de | signer wear, shoes, accesso | ories | |
| | ☐ No | | See Attached. | | | \$1,900.00 |
| | Yes. D | escribe | | | | ψ1,000.00 |
| | | | | | | |
| 12. | Jewelry | | | | | |
| | Examples | | elry, costume jewelry, enga | gement rings, wedding rings | s, heirloom jewelry, watches, gems, gold, | |
| | | silver | | | | |
| | ☐ No | | See Attached. | | | \$425.00 |
| | Yes. D | escribe | | | | , = |
| | | | | | | |
| 13. | Non-farm | animals | | | | |
| | Examples | Dogs, cats, bi | rds, horses | | | |
| | √ No | | | | | |
| | | escribe | | | | |
| | | | | | | |
| 1.4 | Anu atlar | norgenal and t | ousehold items!! -! | ot already list including | v boolth aide vou did not liet | |
| 14. | _ | personal and n | ousenoia items you ald n | ot alleauy list, including an | y health aids you did not list | |
| | ☑ No | | | | | |
| | ☐ Yes. D | escribe | | | | |
| | | | | | | |
| 15. | Add the d | ollar value of all | of your entries from Part | 3, including any entries for | pages you have attached | |
| | | | | | → | \$8,945.00 |
| | | | | | | |

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| Debtor 1 | | Clifton | Monroe | Mitchell | Case number (if known) | | |
|----------|------------------|------------------------|------------------------------------|---|---------------------------------|---|--|
| | | First Name | Middle Name | Last Name | | | |
| | | | | | | | |
| Par | t 4: Describ | oe Your Financi | ial Assets | | | | |
| Do | you own or ha | ave any legal or ed | quitable interest in a | ny of the following? | | Current value of the portion you own? | |
| | | | | | | Do not deduct secured claims or exemptions. | |
| 16. | Cash | | | | | | |
| | | Money you have in | your wallet, in your h | nome, in a safe deposit box, and on hand wh | nen you file your petition | | |
| | ☐ No | | | | | | |
| | Yes | | | | Cash | \$230.00 | |
| 17. | Deposits of r | nonev | | | | | |
| 17. | • | - | or other financial acc | counts; certificates of deposit; shares in cred | dit unions, brokerage houses, a | and | |
| | _ | other similar institut | tions. If you have mu | Itiple accounts with the same institution, list | each. | | |
| | U No ✓ Yes | | | | | | |
| | | | Institution name: | | | | |
| | | | | | | | |
| | 17.1. Checkir | ng account: | Chase checking | 6924 | \$176.49 | | |
| | | | | | | | |
| | 17.2. Checkir | ng account: | Truist checking : management | 2106 - nonfiling spouse sole | unknown | | |
| | | | | | | | |
| | 17.3. Savings | s account: | Bank of America sole management | savings 3261 - nonfiling spouse | <u>unknown</u> | | |
| | | | | | | | |
| | 17.4. Savings | s account: | Truist business management He | savings 4683 - nonfiling spouse sole 's For Me LLC | unknown | | |
| | | | | | | | |
| | 17.5. Certifica | ates of deposit: | | | | | |
| | 176 Other# | nancial account: | Lively HSA - non | filing snouse | unknown | | |
| | i i .o. Otner II | nancial account. | LIVELY HOA - HOR | mmig spouse | unknown | | |
| | 17.7. Other fi | nancial account: | Venmo - nonfilin | g spouse sole management | unknown | | |
| | 47.0 Other 6 | | Daniel was fille | | | | |
| | 17.8. Other ti | nancial account: | Paypai - nonfilin | g spouse sole management | <u>unknown</u> | | |
| | 17.9. Other fi | nancial account: | | | | | |
| 18. | Bonds. mutu | al funds, or public | cly traded stocks | | | | |
| | | | - | rokerage firms, money market accounts | | | |
| | ✓ No | | | | | | |
| | ☐ Yes | | | | | | |
| | Institution or i | issuer name: | | | | | |
| | | | | | | | |
| | | | | | | | |

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Mitchell

Monroe

Debtor 1

Clifton Case number (if known) -First Name Middle Name Last Name 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them..... Name of entity: % of ownership: Pantierra Inversiones, Corp 50% owned by Debtor and 50% \$0.50 owned by nonfiling spouse SBQ Properties LLC - nonfiling spouse 100% \$0.00 Dawa Management LLC 100% 100 \$1.00 Raba Management LLC 50% 50 \$0.50 100 North America Holdings LLC 100% \$1.00 He's for Me LLC - nonfiling spouse 100% \$0.00 Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about them..... Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: IRA: Mutual of America IRA - nonfiling spouse unknown unknown 401(k) or similar plan: TexaSavers 401(k) - nonfiling spouse 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **√** No ☐ Yes..... Institution name or individual: Electric:

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| Debt | tor 1 | Clifton | Monroe | Mitchell | Case number (if known) | |
|------|---------------------------|--------------------|---------------------------------------|----------------------------------|--|---------|
| | | First Name | Middle Name | Last Name | | |
| | | | | | | |
| | | | | | | |
| | 0 | | | | | |
| | Gas: | | | | | |
| | | | | | | |
| | | | | | | |
| | Heating oil: | | | | | |
| | | | | | | |
| | | | | | | |
| | Security depo | osit on rental uni | t: | | | |
| | | | | | | |
| | Duamaid saut | | | | | |
| | Prepaid rent: | | | | | |
| | | | | | | |
| | Telephone: | | | | | |
| | relepriorie. | | | | | |
| | | | | | | |
| | Water: | | | | | |
| | water. | | | | | |
| | | | | | | |
| | Rented furnit | uro. | | | | |
| | ixemed furnit | uie | | | | |
| | | | | | | |
| | Other: | | | | | |
| | Other. | | | | | |
| | | | | | | |
| 23. | Annuities (A | contract for a pe | eriodic payment of mon | ey to you, either for life or fo | r a number of years) | |
| | √ No | | | | | |
| | | | | | | |
| | ☐ Yes | | | | | |
| | Issuer name | and description: | | | | |
| | ioodo: iidiiio | aa accop | | | | |
| | | | | | | |
| | - | | | | | |
| | | | | | | |
| 24. | Interests in a | n education IRA | A, in an account in a qu | ıalified ABLE program, or u | nder a qualified state tuition program. | |
| | 26 U.S.C. §§ | 530(b)(1), 529A | (b), and 529(b)(1). | | | |
| | _ | (-)(-), | (0), ===(0)(1) | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |
| | La a Charles and a second | | and Organization Classic | | 100.5504(-) | |
| | institution na | me and descripti | on. Separately file the | records of any interests. 11 I | J.S.C. § 521(c): | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 25. | Trusts. equit | able or future in | terests in property (otl | ner than anything listed in li | ine 1), and rights or powers exercisable for | |
| | your benefit | | , , , , , , , , , , , , , , , , , , , | 3 | ,, | |
| | • | | | | | |
| | □ No | | | | | |
| | Yes. Give | specific | The Tammy Shaklee | Trust - nonfiling spouse | | |
| | | on about them | | Trust Homming spease | | unknown |
| | omatic | | | | | unknown |
| | | | | | | |
| 26. | Patents, cop | yrights, tradema | arks, trade secrets, and | d other intellectual property | | |
| | Examples: 1 | nternet domain r | names, websites, proce | eds from royalties and licen | sing agreements | |
| | | | ,, | , | | |
| | ☑ No | | | | | |
| | ☐ Yes. Give | | | | | |
| | informatio | on about them | | | | |
| | | | | | | |

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| Debt | or 1 | Clifton | Monroe | Mitchell | Case number (if known) | |
|------|--------------------------|---|-----------------------|---|---|---|
| | | First Name | Middle Name | Last Name | | |
| 27. | Examples: | Building permits, ex | | s operative association holdings, | iquor licenses, | |
| | √ No | professional license | es | | | 1 |
| | Yes. Give informati | e specific on about them | | | | |
| Mone | ey or propert | y owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds | owed to you | | | | |
| | √ No | | | | | |
| | | e specific information, including whether | | | Federal: | |
| | alre | eady filed the returns tax years | s and | | State: | |
| | uic | tax years | | | Local: | |
| | | | | | | |
| 29. | Family supp Examples: | | um alimony, spousal | support, child support, mainten | ance, divorce settlement, property settleme | nt |
| | ☑ No | | | | | |
| | ☐ Yes. Giv | e specific information | on | | Alimony: | |
| | | | | | Maintenance: | |
| | | | | | Support: | |
| | | | | | Divorce settlement: | |
| | | | | | Property settlement: | |
| | | | - | | | |
| 30. | | nts someone owes | • | | | |
| | | | | ments, disability benefits, sick page ou made to someone else | ay, vacation pay, workers' compensation, | |
| | _ | e specific informatio | on social se | ecurity payments of \$3820 | | unknown_ |
| | | | | | | |
| 31. | Interests in | insurance policies | | | | |
| | | Health, disability, or | life insurance; healt | h savings account (HSA); credit | homeowner's, or renter's insurance | |
| | ☐ No ☑ Yes. Nar | me the insurance co | many | | | |
| | | each policy and list i | | any name: | Beneficiary: | Surrender or refund value: |
| | | | Texas | s Life Ins Co whole life policy | spouse | \$146,485.00 |
| | | | | | | |
| | | | | ctive Life Ins Co term policy - ling spouse | spouse | unknown |
| | | | | | | |

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| Deb | tor 1 | Clifton | Monroe | Mitchell | Case number (if known) | |
|-----|----------------|------------------|-------------------------------|--|---|---------------------------------------|
| | | First Name | Middle Name | Last Name | | |
| | | | | | | |
| | | | New Y | ork Life Ins Co long term o | care nolicy | \$0.00 |
| | | | <u> 1401/1</u> | OTR Elle ille de long term e | | Ψ0.00 |
| | | | | | | |
| | | | New Y | ork Live Ins Co long term | care | |
| | | | policy | - nonfiling spouse | | \$0.00 |
| 32. | Any interest | in property th | nat is due you from some | one who has died | | |
| | If you are the | beneficiary o | f a living trust, expect proc | | olicy, or are currently entitled to receive | |
| | | ause someone | e has died. | | | |
| | ✓ No | a anasifia infan | mation | | | |
| | Tes. Give | e specific infor | mation | | | |
| | | | | | | |
| | | | | | | |
| 33. | _ | _ | - | ve filed a lawsuit or made a nce claims, or rights to sue | demand for payment | |
| | ✓ No | Accidents, em | | The claims, or rights to suc | | |
| | | cribe each cla | im | | | |
| | | | | | | |
| | | | | | | |
| 34. | | | quidated claims of every i | nature, including countercla | aims of the debtor and rights | |
| | to set off cla | ims | | | | |
| | ✓ No | cribe each cla | : | | | |
| | Tes. Des | cribe each cia | um | | | |
| | | | | | | |
| 35. | Any financia | l assets you o | did not already list | | | |
| | √ No | | | | | |
| | | e specific infor | mation | | | |
| | | | | | | |
| | | | | | | |
| 36. | | | | 4, including any entries for | pages you have attached | \$147.124.07 |
| | IOI Pail 4. W | me mai numi | Jer nere | | | \$147,134.07 |
| | | | | | | |
| Par | t 5: Descri | be Any Bus | iness-Related Propert | :y You Own or Have an | Interest In. List any real estate in Par | t 1. |
| 37. | | - | egal or equitable interest i | in any business-related pro | perty? | |
| | No. Go to | | | | | |
| | Yes. Go to | o line 38. | | | | |
| | | | | | | Current value of the portion you own? |
| | | | | | | Do not deduct secured |
| | | | | | | claims or exemptions. |
| 38. | Accounts re | ceivable or co | ommissions you already e | arned | | |
| | ☑ No | | | | | |
| | Yes. Des | cribe | | | | |

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| Debi | tor 1 | Clitton | wonroe | Witteneil | Case number (if known) | |
|------|-----------------|----------------------|---------------------------|---------------------------|---|-------------------------------|
| | | First Name | Middle Name | Last Name | | |
| | | | | | | |
| 39. | _ | ipment, furnishing | | | | |
| | Examples: | Business-related | computers, software, n | nodems, printers, copiers | , fax machines, rugs, telephones, desks, chairs, electronic | devices |
| | √ No | | | | | |
| | | escribe | | | | |
| | | | | | | |
| 40. | Machinery | , fixtures, equipme | ent, supplies you use ir | business, and tools of | your trade | |
| | √ No | | | | | |
| | _ | escribe | | | | |
| | | | | | | |
| 11 | Inventory | | | | | |
| 41. | Inventory | | | | | |
| | √ No | | | | | |
| | ☐ Yes. De | escribe | | | | |
| | | | | | | |
| 42. | Interests in | n partnerships or j | oint ventures | | | |
| | √ No | | | | | |
| | Yes. De | escribe | | | | |
| | Name of e | ntity: | | % (| of ownership: | |
| | | | | | • | |
| | | | | | % | |
| 43 | Customer | lists mailing lists | , or other compilations | | | |
| | ✓ No | | , or ourse comprising | | | |
| | | o your lists include | e personally identifiable | e information (as defined | I in 11 U.S.C. § 101(41A))? | |
| | | √ No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |
| 44. | Any busin | ess-related proper | rty you did not already | list | | |
| | √ No | | | | | |
| | | ive specific | | | | |
| | Informa | ation | | | | |
| | - | | | | | |
| | | | | | | |
| 45. | | | | | for pages you have attached | 4 |
| | for Part 5. | Write that number | nere | | ─ | \$0.00 |
| | | | | | | |
| Par | t 6: Desc | ribe Any Farm- a | and Commercial Fis | hing-Related Propert | y You Own or Have an Interest In. | |
| | | | terest in farmland, list | | | |
| 46. | Do you ow | vn or have any lega | al or equitable interest | in any farm- or commerc | cial fishing-related property? | |
| | √ No. Go | to Part 7. | | | | |
| | Yes. Go | to line 47. | | | | |
| | | | | | Curra | nt value of the |
| | | | | | portion | n you own? |
| | | | | | | deduct secured or exemptions. |
| | | | | | Ciainis | . Chomptons. |

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| Debt | or 1 | Clifton | Monroe | Mitchell | Case number (if known) | |
|-------|-----------------------|--------------------|---------------------------|---|------------------------|--------|
| | | First Name | Middle Name | Last Name | | |
| 47. | Farm animals | s | | | | |
| | | | , farm-raised fish | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 40 | | | | | | |
| 48. | | er growing or h | arvested | | | |
| | ✓ No | | | | | |
| | Yes. Give information | specific | | | <u></u> | |
| | | | | | | |
| 49. | Farm and fish | hing equipment | , implements, machinery, | , fixtures, and tools of trade | | |
| | √ No | | | | | |
| | ☐ Yes | | | | | |
| | | | | | | |
| 50. | Farm and fisl | hing supplies, c | hemicals, and feed | | | |
| | √ No | | | | | |
| | | | | | | |
| | | | | | | |
| 51. | Any farm- an | d commercial fi | shing-related property yo | ou did not already list | | |
| | √ No | | | | | |
| | Yes. Give | specific | | | | |
| | informatio | n | | | | |
| | | | | | | |
| 52. | | | | including any entries for pages you have atta | | \$0.00 |
| | 1011 0111 | no mai namboi | | | | Ψ0.00 |
| | | | | | | |
| Par | t 7: Describ | oe All Propert | y You Own or Have a | n Interest in That You Did Not List Abo | ove | |
| 53 | Do you have | other property | of any kind you did not a | Iready list? | | |
| 00. | - | | ountry club membership | | | |
| | ☐ No | | | | | .1 |
| | Yes. Give | 0,0000 | ontract to purchase home | in Daytona Beach, FL - nonfiling spouse | un | ıknown |
| | informatio | n | | | | |
| | | | | | | |
| | | | | | | |
| 54. | Add the dolla | ar value of all of | your entries from Part 7. | Write that number here | | \$0.00 |
| | | | | | | |
| Danie | . 0 | . T-+-16.F- | ala Danta efiticia Fanna | | | |
| Par | List the | e Totals of Ea | ch Part of this Form | | | |
| 55. | Part 1: Total | real estate, line | 2 | | → | \$0.00 |
| | | | | | | |
| 56. | Part 2: Total | vehicles, line 5 | | <u>\$9,725.00</u> | | |
| 57 | Part 3: Total | personal and ho | ousehold items, line 15 | \$8,945.00 | | |
| 07. | . art o. Iotal | poroviiai alia lit | accincia nonio, into 10 | | | |

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| Debto | or 1 | Clifton | Monroe | Mitchell | | Case number (if know | wn) |
|-------|----------------|-----------------------|----------------------------|-----------|--------------|-------------------------------|---------------------|
| | | First Name | Middle Name | Last Name | | · | · |
| | | | | | | | |
| 58. | Part 4: Total | financial assets, li | ne 36 | | \$147,134.07 | | |
| 59. | Part 5: Total | business-related p | property, line 45 | | \$0.00 | | |
| 60 | Dowt 6: Total | form and fishing | related property line F2 | | ¢0.00 | | |
| 60. | Part 6: IOtal | tarm- and tisning-i | related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total | other property not | listed, line 54 | + | \$0.00 | | |
| 62. | Total person | nal property. Add lin | nes 56 through 61 | | \$165,804.07 | Copy personal property total→ | + \$165,804.07 |
| 62. | iotai persoi | iai property. Add iii | ies 50 tillough 61 | | \$103,004.07 | Copy personal property total | T |
| | | | | | | | |
| 63. | Total of all p | roperty on Schedu | le A/B. Add line 55 + line | 62 | | | <u>\$165,804.07</u> |
| | | | | | | | |
| | | | | | | | |

Official Form 106A/B Schedule A/B: Property page 11

Debtor 1

 Clifton
 Monroe
 Mitchell

 First Name
 Middle Name
 Last Name

Case number (if known)

SCHEDULE A/B: PROPERTY

Continuation Page

| sofa - nonfiling spouse | \$0.00 |
|--|------------|
| chairs - nonfiling spouse | \$0.00 |
| tables - nonfiling spouse | \$0.00 |
| bookcases -nonfiling spouse | \$0.00 |
| lamps - nonfiling spouse | \$0.00 |
| entertainment center | \$75.00 |
| rugs | \$1,500.00 |
| mirrors | \$400.0 |
| refrigerator - nonfiling spouse | \$0.00 |
| kitchenware | \$250.00 |
| buffet | \$200.0 |
| table and chairs - nonfiling spouse | \$0.00 |
| china cabinet | \$175.00 |
| china/crystal - nonfiling spouse | \$0.00 |
| bed - nonfiling spouse | \$0.00 |
| night stands | \$150.00 |
| bed - nonfiling spouse | \$0.00 |
| chairs - nonfiling spouse | \$0.00 |
| file cabinets | \$45.00 |
| linens - nonfiling spouse | \$0.00 |
| patio furniture - nonfiling spouse | \$0.00 |
| grill - nonfiling spouse | \$0.00 |
| refrigerator - nonfiling spouse | \$0.00 |
| washer - nonfiling spouse | \$0.00 |
| dryer- nonfiling spouse | \$0.00 |
| tools | \$400.00 |
| art | \$400.00 |
| | <u> </u> |
| books | \$375.0 |
| misc household goods | \$750.00 |
| Electronics | |
| tablet | \$200.0 |
| Iphone | \$300.0 |
| televisions - nonfiling spouse | \$0.0 |
| CDs/DVDs - nonfiling spouse | \$0.0 |
| | |
| Firearms | |
| pistol | \$400.00 |
| pistol - nonfiling spouse | \$0.00 |
| Clothes | |
| mens clothing and accessories | \$1,900.0 |
| womens clothing and accessories - nonfiling spouse | |
| lourales | |
| Jewelry mens jewelry | \$425.0 |

Official Form 106A/B

Schedule A/B: Property

Debtor 1 Clifton Monroe Mitchell Case number (if known) Last Name Last Name

SCHEDULE A/B: PROPERTY

Continuation Page

| womens jewelry - nonfiling spouse | \$0.00 |
|---|----------------|
| 7. Deposits of money | |
| Checking account: Bank of America checking 7949 - nonfiling spouse sole management | unknown |
| Checking account: Truist business checking 2467 - nonfiling spouse sole management He's For Me LLC | unknown |
| Checking account: Bank of America business checking 5480 - nonfiling spouse sole management He's For Me LLC | unknown |
| Checking account: Truist business checking 3261 - nonfiling spouse sole management SBQ Properties LLC | unknown |
| Checking account: Banisto savings 4614 Bank based in Panama | \$239.58 |
| Checking account: Banisto savings 8552 - nonfiling spouse sole management Bank based in Panama | <u>unknown</u> |

Official Form 106A/B Schedule A/B: Property

| 22-10413-tmd Doc#1 Filed | 06/30/22 Entered | d 06/30/22 18:32:29 Main Do | ocument Pg 22 of 83 |
|--|---|---|--|
| Fill in this information to identify your case: | | | |
| Debtor 1 Clifton Monro First Name Middle | | | |
| Debtor 2 (Spouse, if filing) First Name Middle | Name Last Name | | |
| United States Bankruptcy Court for the: | Western District of | f Texas | |
| Case number (if known) | _ | | Check if this is an amended filing |
| Official Form 106C | | | |
| Schedule C: The Property | y You Claim a | as Exempt | 04/22 |
| property you listed on Schedule A/B: Property (Officult and attach to this page as many copies of Part known). For each item of property you claim as exempt, you amount as exempt. Alternatively, you may claim the Some exemptions—such as those for health aids, However, if you claim an exemption of 100% of fair property is determined to exceed that amount, your Part 1: | 2: Additional Page as nec u must specify the amount e full fair market value of t rights to receive certain b market value under a law r exemption would be limi | essary. On the top of any additional pages t of the exemption you claim. One way of on the property being exempted up to the amonenefits, and tax-exempt retirement funds that limits the exemption to a particular de | s, write your name and case number (indicate the control of the co |
| Which set of exemptions are you claiming? | | | |
| You are claiming state and federal nonbank ✓ You are claiming federal exemptions. 11 U. | | S.C. § 522(b)(3) | |
| 2. For any property you list on Schedule A/B that | - ,,,, | I in the information below. | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: 2010 Hyundai Tucson sole management community property Line from | <u>\$9,725.00</u> | ☐ 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(2)(Claimed: \$4,450.00) |

Official Form 106C

Schedule A/B: 3.1

Brief description:

Schedule A/B:

Line from

2009 Vespa PX150

nonfiling spouse - separate property

3.2

 $\mathbf{\Lambda}$

\$0.00

\$5,275.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up

to any applicable statutory limit

11 U.S.C. § 522(d)(5)

\$0.00)

11 U.S.C. § 522(d)(2)(Claimed:

| Debtor 1 | | Clifton | Monroe | Mitchell | Case number (if known) | | |
|----------|---|-------------------|-------------------------|---------------------------|--------------------------------|--|--|
| | | First Name | Middle Name | Last Name | | | |
| Par | t 2: Additi | onal Page | | | | | |
| 3. | Are you clai | ming a homeste | ad exemption of more t | han \$189,050? | | | |
| | (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No | | | | | | |
| | ☐ Yes. Did | you acquire the p | property covered by the | exemption within 1,215 da | ys before you filed this case? | | |
| | ☐ No | | | | | | |
| | Yes | | | | | | |

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| Debtor 1 | First Name | Monroe Middle Name | Last Name | | Case numb | er (if known) |
|-------------------------|----------------------|-----------------------|--------------------------------------|--------------|---|--|
| Part 2: Addi | itional Page | | | | | |
| | on of the property a | | Current value of the portion you own | Am | nount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Ch | eck only one box for each exemption. | |
| Brief descriptio | n: | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| sofa - nonfiling | g spouse | | \$0.00 | ₫ | 100% of fair market value, up | \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 11 |
| chairs - nonfilir | ng spouse | | \$0.00 | <u> </u> | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44.11.0.0.5.500/4\/2\/0\/0\=:===== |
| tables - nonfili | ng spouse | | \$0.00 | \(\forall \) | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44.11.0.0.5.500/4\/2\/0\/0\=:===== |
| bookcases -no | onfiling spouse | | \$0.00 | Ą | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44.11.0.0.5.500/4\/2\/0\-: |
| lamps - nonfilir | ng spouse | | \$0.00 | <u> </u> | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44.11.0.0.5.500/4\/2\/0\-: |
| entertainment | center | | \$75.00 | ₹ J | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$75.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44.11.0.0.0.5.500/4//0//0/-1 |
| rugs | | | \$1,500.00 | ₹ □ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$700.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| | | | | | \$800.00 | 11 U.S.C. § 522(d)(5) |
| | | | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief descriptio | n: | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| mirrors | | | \$400.00 | Ą | 100% of fair market value, up | \$400.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |

| Debtor 1 | Clifton | Monroe | Mitchell | Case number (if known) | | |
|----------------------------|--------------------|-------------|--------------------------------------|------------------------|--------------------------------------|---|
| | First Name | Middle Name | Last Name | | | |
| Part 2: Addition | onal Page | | | | | |
| | of the property a | | Current value of the portion you own | Am | nount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Ch | eck only one box for each exemption. | |
| Brief description: | | | | | | 44 LL C. C. S. 500(d)/0)/Olaire a di |
| refrigerator - non | filing spouse | | \$0.00 | ₹ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | |
| kitchenware | | | \$250.00 | <u> </u> | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$250.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | 44 11 0 0 0 5 500(4)(0)(0)-1 |
| buffet | | | \$200.00 | ₹ □ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$200.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | 44 11 0 0 0 5 500/4//0//0/ai |
| table and chairs | - nonfiling spouse | | \$0.00 | 4 | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | 44 11 0 0 0 5 500/4//0//0/ai |
| china cabinet | | | \$175.00 | ₹ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$175.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | 11 11 C C & E22/d\/2\/Claimad |
| china/crystal - no | onfiling spouse | | \$0.00 | ₫ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| bed - nonfiling sp | oouse | | \$0.00 | ₫ | 100% of fair market value, up | \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description: | | | | | | 14 11 C C & E00(d)(0)(C)=: |
| night stands | | | \$150.00 | ₹ □ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$150.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | , |
| Brief description: | | | | | | 44 11 0 0 0 0 000/4//0//0/ |
| bed - nonfiling sp | ouse | | \$0.00 | ₹ □ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |

| Debtor 1 | Clifton First Name | Monroe Middle Name | Mitchell Last Name | Case number (if known) | | |
|-------------------------|-----------------------|-----------------------|--------------------------------------|------------------------|--------------------------------------|---|
| Part 2: Addi | tional Page | | | | | |
| | on of the property a | | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Ch | eck only one box for each exemption. | |
| Brief description | | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| chairs - nonfilir | ng spouse | | \$0.00 | \checkmark | 100% of fair market value, up | \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| file cabinets | | | \$45.00 | $\overline{\Delta}$ | 100% of fair market value, up | \$45.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 11 |
| linens - nonfilir | ng spouse | | \$0.00 | ₫ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 44.11.C.C. \$ 522/d\/2\/Claimad |
| patio furniture | nonfiling spouse | | \$0.00 | ☑ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 44 11 0 0 6 500(4)(0)(0)(-1 |
| grill - nonfiling | spouse | | \$0.00 | ₹ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 44.11.0.0. \$ 500/4//0//0/5 |
| refrigerator - no | onfiling spouse | | \$0.00 | A | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 44 11 0 0 0 5 500 (1) (0) (0) : |
| washer - nonfil | ing spouse | | \$0.00 | ₹ J | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 44 11 0 0 0 5 500(4)(0)(0) |
| dryer- nonfiling | spouse | | \$0.00 | ₹ □ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 6 | | | | to any applicable statutory limit | |
| Brief description | n: | | | | | 44 11 0 0 0 500 (1) (0) (0) |
| tools | | | \$400.00 | ₹ □ | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$400.00) |
| Line from | 6 | | | | to any applicable statutory limit | |

| Debtor 1 | Clifton | Monroe | Mitchell | | Case numb | er (if known) |
|-------------------------|----------------------|-------------|--------------------------------------|--------------------------|---|---|
| | First Name | Middle Name | Last Name | | | |
| Part 2: Addi | tional Page | | | | | |
| | on of the property a | | Current value of the portion you own | Amo | unt of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Chec | k only one box for each exemption. | |
| Brief descriptio | n: | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| art | | | \$400.00 | <u></u> | 00% of fair market value, up | \$400.00) |
| Line from Schedule A/B: | 6 | | | | o any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44 11 0 0 6 500(4)/0)/01-1 |
| books | | | \$375.00 | ☑ ₁ | 00% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$375.00) |
| Line from Schedule A/B: | 6 | | | | o any applicable statutory limit | |
| Brief descriptio | n: | | | | | |
| misc househol | d goods | | \$750.00 | <u> </u> | 000/ | 11 U.S.C. § 522(d)(3)(Claimed: \$700.00) |
| Line from Schedule A/B: | 6 | | | | 00% of fair market value, up o any applicable statutory limit | ψ100.00) |
| | | | | | \$50.00 | 11 U.S.C. § 522(d)(5) |
| | | | | □ ₁ | 00% of fair market value, up | |
| | | | | | o any applicable statutory limit | |
| Brief descriptio | n: | | | | | |
| tablet | | | \$200.00 | □ _ ☑ 1 | | 11 U.S.C. § 522(d)(3)(Claimed: \$200.00) |
| Line from Schedule A/B: | | | | | 00% of fair market value, up o any applicable statutory limit | \$200.00) |
| Brief descriptio | n: | | | | | |
| Iphone | | | \$300.00 | | 000/ // | 11 U.S.C. § 522(d)(3)(Claimed: \$300.00) |
| Line from | | | | | 00% of fair market value, up any applicable statutory limit | |
| Schedule A/B: | | | | | | |
| Brief descriptio | n: | | | | | 44 11 C C S E22/d\/2\/Claimad |
| televisions - no | onfiling spouse | | \$0.00 | <u>J</u> 1 | 00% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from Schedule A/B: | 7 | | | | o any applicable statutory limit | |
| Brief descriptio | n: | | | | | 44 11 0 0 6 500(4)(2)(0) |
| CDs/DVDs - no | onfiling spouse | | \$0.00 | □ _ ☑ 1 | 00% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| Line from | | | | | oo% of fair market value, up any applicable statutory limit | |
| Schedule A/B: | 7 | | | | | |

| Debtor 1 | Clifton | Monroe | Mitchell | ell Case number (if known) | | |
|----------------------------|-----------------------|---------------|--------------------------------------|----------------------------|---|---|
| | First Name Middle Nar | | Last Name | | | |
| Part 2: Addit | ional Page | | | | | |
| | n of the property a | | Current value of the portion you own | Am | nount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Ch | eck only one box for each exemption. | |
| Brief description | : | | | | | 11 U.S.C. § 522(d)(3)(Claimed: |
| sporting goods | | _ | \$1,000.00 | ₫ | 100% of fair market value, up | \$700.00) |
| Line from Schedule A/B: | 9 | | | | to any applicable statutory limit | |
| Scriedule A/B. | | | | √ | \$300.00 | 11 U.S.C. § 522(d)(5) |
| | | | | | 100% of fair market value, up | 11 0.0.0. 3 022(d)(0) |
| | | | | | to any applicable statutory limit | |
| Brief description | | | | | | |
| pistol | | | \$400.00 | ₹ | 100% of fair market value, up | 11 U.S.C. § 522(d)(5)(Claimed: \$400.00) |
| Line from | | | | • | to any applicable statutory limit | <u> </u> |
| Schedule A/B: | 10 | | | | | |
| Brief description | : | | | | | 11 U.S.C. § 522(d)(5)(Claimed: |
| pistol - nonfiling | spouse | | \$0.00 | $ \sqrt{} $ | 100% of fair market value, up | \$0.00) |
| Line from Schedule A/B: | 10 | | | | to any applicable statutory limit | |
| Brief description | | | | | | 44 11 C C |
| mens clothing a | nd accessories | | \$1,900.00 | 4 | 100% of fair market value, up | 11 U.S.C. § 522(d)(3)(Claimed: \$700.00) |
| Line from | 44 | | | | to any applicable statutory limit | |
| Schedule A/B: | 11 | | | √ | #4 000 00 | 14 I I C C C E 202(d)/E) |
| | | | | _ | \$1,200.00 100% of fair market value, up | 11 U.S.C. § 522(d)(5) |
| | | | | | to any applicable statutory limit | |
| Brief description: | · | | | | | |
| · | g and accessories | s - nonfiling | \$0.00 | \ \ \ | 4000/ of fe's social at each as ass | 11 U.S.C. § 522(d)(3)(Claimed: \$0.00) |
| spouse | | | | V | 100% of fair market value, up to any applicable statutory limit | φο.σσγ |
| Line from Schedule A/B: | 11 | | | | | |
| Brief description | : | | | | | 11 I I S C & 522(d)(4)(Claimad: |
| mens jewelry | | | \$425.00 | ₫ | 100% of fair market value, up | 11 U.S.C. § 522(d)(4)(Claimed: \$425.00) |
| Line from Schedule A/B: | 12 | | | | to any applicable statutory limit | |
| Brief description | : | | | | | 11 11 S C & 522/d\/4\/Claimad |
| womens jewelry | · - nonfiling spous | e | \$0.00 | A | 100% of fair market value, up | 11 U.S.C. § 522(d)(4)(Claimed: \$0.00) |
| Line from Schedule A/B: | 12 | | | _ | to any applicable statutory limit | |

| Debtor 1 | Clifton | Monroe | Mitchell | | Case number | er (if known) |
|-----------------------------------|--|------------------|--------------------------------------|----------|---|---|
| | First Name | Middle Name | Last Name | | | |
| Part 2: Addit | tional Page | | | | | |
| | on of the property hat lists this prope | | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Brief description | n: | | | | | 11 |
| Cash | | | \$230.00 | ₹ | 100% of fair market value, up | 11 U.S.C. § 522(d)(5)(Claimed: \$230.00) |
| Line from Schedule A/B: | 16 | | | | to any applicable statutory limit | |
| Brief description | 1: | | | | | |
| Chase checking | | | \$176.49 | ∆ | | 11 U.S.C. § 522(d)(5)(Claimed: \$176.49) |
| Checking accoun | t | | | Y | 100% of fair market value, up to any applicable statutory limit | <u> </u> |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | n: | | | | | 44 11 0 0 0 5 500(4)/5)/Oleite d |
| | 2106 - nonfiling sp | pouse sole | unknown | 4 | 100% of fair market value, up | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) |
| management Checking account | t | | | | to any applicable statutory limit | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | n: | | | | | |
| | a checking 7949 - | nonfiling spouse | unknown | ₹ □ | 4000/ -6/6-10 | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) |
| sole manageme Checking account | | | | • | 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | | | | | | |
| · | ı. a savings 3261 - r | oonfiling spouse | unknown | | | 11 U.S.C. § 522(d)(5)(Claimed: |
| sole manageme | | ionining spease | | | 100% of fair market value, up | \$0.00) |
| Savings account | | | | | to any applicable statutory limit | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | 1: | | | | | 44.11.0.0. \$ 500(4)/5)/6 |
| Lively HSA - no | • . | | unknown | 4 | 4000/ of foir resultatively. | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) |
| Other financial ac | count | | | • | 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | n: | | | | | 11 |
| | checking 2467 - n | | unknown | ₹ | 100% of fair market value, up | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) |
| sole manageme Checking account | ent He's For Me Ll t | _C | | - | to any applicable statutory limit | |
| | <u>- </u> | | | | • | |
| Line from | 17 | | | | | |

| Debtor 1 | Clifton First Name | Monroe Middle Name | Mitchell Last Name | Case number (if known) | | |
|--|--|---------------------------|--------------------------------------|---|---|--|
| Part 2: Addi | tional Page | | | | | |
| | on of the property hat lists this prope | | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | |
| | | | Copy the value from Schedule A/B | Check only one box for each exemption. | | |
| Brief description | ո: | | | | 11 U.S.C. § 522(d)(5)(Claimed: | |
| | savings 4683 - no ent He's For Me Ll | | <u>unknown</u> | 100% of fair market value, up to any applicable statutory limit | \$0.00) | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | ո: | | | | 44.11.0.0. \$ 500/d\/5\/Claimadi | |
| | ca business checki e sole management | • | unknown | 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | า: | | | | 44.11.0.0. \$ 500/d\/5\/Claimadi | |
| Truist business sole management Checking account | checking 3261 - n ent SBQ Propertie t | nonfiling spouse s LLC | unknown | 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | n: | | | | 11 U.S.C. § 522(d)(5)(Claimed: | |
| Banisto saving: Checking accoun | s 4614 Bank based t | d in Panama | \$239.58 | 100% of fair market value, up to any applicable statutory limit | \$239.58) | |
| Line from Schedule A/B: | 17 | | | to any applicable statutory limit | | |
| Brief description | ո։ | | | | 11 U.S.C. § 522(d)(5)(Claimed: | |
| | s 8552 - nonfiling s Bank based in Pana It | | <u>unknown</u> | 100% of fair market value, up to any applicable statutory limit | \$0.00) | |
| Line from Schedule A/B: | 17 | | | | | |
| Brief description | ո: | | | | 44 11 C C S 520/d\/5\/Claimad | |
| Venmo - nonfili Other financial ac | ng spouse sole ma | anagement | unknown | 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) | |
| Line from Schedule A/B: | 17 | | | to any applicable statutory little | | |
| Brief description | า: | | | | 11 | |
| Paypal - nonfili Other financial ac | ng spouse sole ma ecount | anagement | unknown | 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5)(Claimed: \$0.00) | |
| Line from Schedule A/B: | 17 | | | to any applicable statutory littlit | | |

| Debtor 1 <u>Clifton Monroe</u> | | Mitchell | Case number (if known) | | | |
|--------------------------------|--|-----------------|--------------------------------------|----------|---|-------------------------------------|
| | First Name | Middle Name | Last Name | | | |
| Part 2: Add | itional Page | | | | | |
| | on of the property a that lists this prope | | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Brief description | on: ement LLC 100% | | \$1.00 | √ | \$1.00 | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: | | | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description | on: ement LLC 50% | | \$0.50 | ⊻ | \$0.50 | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: | | | φσ.30 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description | on: a Holdings LLC 100% | 6 | \$1.00 | 4 | \$1.00 | 11 U.S.C. § 522(d)(5) |
| Line from Schedule A/B: | 19 | | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description | on: ersiones, Corp 50% o | owned by Debtor | \$0.50 | 4 | \$0.50 | 11 U.S.C. § 522(d)(5) |
| and 50% owner. | ed by nonfiling spou | se | | Ц | 100% of fair market value, up to any applicable statutory limit | |
| Schedule A/B: | 19 | | | | | |
| Brief description | | | unknaum | | | 11 U.S.C. § 522(d)(12)(Claimed: |
| Line from Schedule A/B: | erica IRA - nonfiling s 21 | spouse | unknown | √ | 100% of fair market value, up to any applicable statutory limit | \$0.00) |
| Brief description | on: 01(k) - nonfiling spot | ISO . | unknown | | | 11 U.S.C. § 522(d)(12)(Claimed: |
| Line from Schedule A/B: | | <u></u> | unknown | √ | 100% of fair market value, up to any applicable statutory limit | \$0.00) |
| Brief description | on: | | | | | 42 U.S.C. § 407(Claimed: \$0.00) |
| social security Line from | payments of \$3820 | | unknown | ₫ | 100% of fair market value, up to any applicable statutory limit | 42 0.0.0. § 407 (Orallined. \$0.00) |
| Schedule A/B: | | | | | | |
| Brief description | on: Co whole life policy | | \$146,485.00 | | | 11 U.S.C. § 522(d)(7)(Claimed: |
| Line from Schedule A/B: | | | Ψ170,700.00 | √ | 100% of fair market value, up to any applicable statutory limit | \$18,755.00) |

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| Debtor 1 | Clifton | Monroe | Mitchell | Case number | er (if known) |
|-------------------------------------|-------------------|--------------|--------------------------------------|---|------------------------------------|
| | First Name | Middle Name | Last Name | | |
| | | | | | |
| Part 2: Addition | onal Page | | | | |
| Brief description Schedule A/B that | | | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: | | | | | |
| | Co torm policy | nonfiling | unknown | Ų | 11 U.S.C. § 522(d)(7)(Claimed: |
| Protective Life Ins | s Co term policy | - nonling | UIRIOWII | 100% of fair market value, up | \$0.00) |
| spouse | | | | to any applicable statutory limit | |
| Line from | | | | , | |
| Schedule A/B: | 31 | | | | |
| | | | | | |
| Brief description: | | | | | 11 LL C C & F22/d\/7\/Claimad: |
| New York Life Ins | Co long term ca | re policy | \$0.00 | | 11 U.S.C. § 522(d)(7)(Claimed: |
| | | | | √ 100% of fair market value, up | \$0.00) |
| Line from | | | | to any applicable statutory limit | |
| Schedule A/B: | 31 | | | | |
| Brief description: | | | | | |
| | | | | | 11 U.S.C. § 522(d)(7)(Claimed: |
| New York Live Ins | s Co long term ca | are policy - | \$0.00 | 100% of fair market value, up | \$0.00) |
| nonfiling spouse | | | | | |
| Line from | | | | to any applicable statutory limit | |
| Schedule A/B: | 31 | | | | |
| Scriedule A/D. | <u> </u> | | | | |

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WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Mitchell, Clifton Monroe CASE NO

> CHAPTER Chapter 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|-----|--|-------------------------|-----------------------|--------------|------------------------|----------------------------|
| 1. | Real Estate | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 3. | Motor vehicle | \$9,725.00 | \$0.00 | \$9,725.00 | \$9,725.00 | \$0.00 |
| 4. | Watercraft, trailers, motors homes, and accessories | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 6. | Household goods and furnishings | \$4,720.00 | \$0.00 | \$4,720.00 | \$4,720.00 | \$0.00 |
| 7. | Electronics | \$500.00 | \$0.00 | \$500.00 | \$500.00 | \$0.00 |
| 8. | Collectibles of value | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 9. | Equipment for sports and hobbies | \$1,000.00 | \$0.00 | \$1,000.00 | \$1,000.00 | \$0.00 |
| 10. | Firearms | \$400.00 | \$0.00 | \$400.00 | \$400.00 | \$0.00 |
| 11. | Clothes | \$1,900.00 | \$0.00 | \$1,900.00 | \$1,900.00 | \$0.00 |
| 12. | Jewelry | \$425.00 | \$0.00 | \$425.00 | \$425.00 | \$0.00 |
| 13. | Nonfarm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 14. | Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 16. | Cash | \$230.00 | \$0.00 | \$230.00 | \$230.00 | \$0.00 |
| 17. | Deposits of money | \$416.07 | \$0.00 | \$416.07 | \$416.07 | \$0.00 |
| 18. | Bonds, mutual funds, or publicly traded stocks | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 19. | Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock | \$3.00 | \$0.00 | \$3.00 | \$3.00 | \$0.00 |
| 20. | Bonds and other financial instruments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 21. | Retirement or pension accounts | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 22. | Security deposits and prepayments | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 23. | Annuities | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 24. | Interest in a qualified education fund, such as an education IRA | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 25. | Trusts, equitable or future interests in property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 26. | Copyrights, trademarks, websites and other intellectual property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 27. | Licenses, Franchises, and other general intangibles | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 28. | Tax refunds | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 29. | Family support | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 30. | Other amounts owed to the debtor | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 31. | Insurance policies | \$146,485.00 | \$127,730.00 | \$18,755.00 | \$18,755.00 | \$0.00 |
| 32. | Interest in property from deceased | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 33. | Claims against third parties | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

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WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Mitchell, Clifton Monroe CASE NO

CHAPTER Chapter7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

| No. | Category | Gross Property Value | Total Encumbrances | Total Equity | Total Amount Exempt | Total Amount Non-Exempt |
|-----|--|-------------------------|-----------------------|--------------|------------------------|----------------------------|
| 34. | All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 35. | Other financial asset | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 38. | Accounts receivable | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 39. | Office equipment, furnishings, and supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 40. | Machinery, fixtures and equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 41. | Inventory | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 42. | Interests in partnerships or joint ventures | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 43. | Customer lists | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 44. | Other businessrelated property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 47. | Farm animals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 48. | Crops | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 49. | Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 50. | Supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 51. | Other farm or fishing related property | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| 53. | Other Assets | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| | TOTALS: | \$165,804.07 | \$127,730.00 | \$38,074.07 | \$38,074.07 | \$0.00 |

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WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Mitchell, Clifton Monroe CASE NO

CHAPTER Chapter7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

| Property Description | Market Value | Lien | Equity |
|----------------------|--------------|--------|--------|
| Real Property | | | |
| (None) | | | |
| Personal Property | | | |
| (None) | | | |
| TOTALS: | \$0.00 | \$0.00 | \$0.00 |

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

| | <u> </u> | | | |
|----------------------|--------------|--------------|-------------|-------------------|
| Property Description | Market Value | Lien | Equity | Non-Exempt Amount |
| Real Property | | | | |
| (None) | | | | |
| Personal Property | | | | |
| (None) | | | | |
| TOTALS: | \$165,804.07 | \$127,730.00 | \$38,074.07 | \$0.00 |

| Summary | |
|---|--------------|
| A. Gross Property Value (not including surrendered property) | \$165,804.07 |
| B. Gross Property Value of Surrendered Property | \$0.00 |
| C. Total Gross Property Value (A+B) | \$165,804.07 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$127,730.00 |
| E. Gross Amount of Encumbrances on Surrendered Property | \$0.00 |
| F. Total Gross Encumbrances (D+E) | \$127,730.00 |
| G. Total Equity (not including surrendered property) / (A-D) | \$38,074.07 |
| H. Total Equity in surrendered items (B-E) | \$0.00 |
| I. Total Equity (C-F) | \$38,074.07 |
| J. Total Exemptions Claimed (Wild Card Used: \$8,674.07, Available: \$6,750.93) | \$38,074.07 |
| K. Total Non-Exempt Property Remaining (G-J) | \$0.00 |

| Fill in this information to | identify your case: | | | | | |
|---|-----------------------|-----------------------|---|---|---|-----------------------------------|
| Debtor 1 | Clifton First Name | Monroe Middle Name | Mitchell Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankrupt | | | Vestern District of Texas | | | |
| Case number (if known) | | | | | Check if amende | this is an d filing |
| Official Form 1 | 06D | | | | | |
| Schedule D: | Creditor | s Who H | ave Claims Secure | d by Prope | erty | 12/15 |
| | | | ople are filing together, both are equaller the entries, and attach it to this form | | | |
| I. Do any creditors have | claims secured by | y your property? | | | | |
| ☐ No. Check this box | and submit this fo | rm to the court wit | th your other schedules. You have nothi | ng else to report on tl | nis form. | |
| ✓ Yes. Fill in all of the | information below | ·. | | | | |
| Part 1: List All Secu | ured Claims | | | | | |
| separately for each | claim. If more than | one creditor has | secured claim, list the creditor a particular claim, list the other n alphabetical order according to the | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Texas Life Insurance | e Co | Describe th | ne property that secures the claim: | \$127,730.00 | \$146,485.00 | \$0.00 |
| Creditor's Name | | Texas Life | Ins Co whole life policy | | | |
| PO Box 830 Number Street | | | | | | |
| Waco, TX 76703-08 | 330 | As of the da | ate you file, the claim is: Check all that | | | |
| City | State ZIP Code | | | | | |
| Who owes the debt | ? Check one. | Conting | | | | |
| ☑ Debtor 1 only | | Unliquid | ated | | | |
| Debtor 2 only | | ☐ Disputed | d | | | |
| Debtor 1 and De | • | | en. Check all that apply. | | | |
| At least one of the another | | | ement you made (such as mortgage red car loan) | | | |
| Check if this cla community debt | | lien) | y lien (such as tax lien, mechanic's | | | |
| Date debt was incu | rred | _ | nt lien from a lawsuit | | | |
| 8/1993 | | _ Uother (ir | ncluding a right to offset) | | | |
| | | Last 4 digit | s of account number 2 0 9 7 | | | |
| 400000000000000000000000000000000000000 | | | | ٠ | | |

Remarks:

50% nonconsumer - loan was taken out in 1993 so lots of interest has been tacked on

Add the dollar value of your entries in Column A on this page. Write that number here:

\$127,730.00

| Debtor 1 | Clifton | Monroe | Mitchell | | Case numb | er (if known) | |
|----------|---|------------------------|--|------------|---|---|-----------------------------------|
| | First Name | Middle Name | Last Name | | | | |
| Part 1 | Additional Page After listing any en 2.3, followed by 2.4 | | number them beginning | with D | column A mount of claim o not deduct the alue of ollateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.2 | | Describe | the property that secures the | claim: | | | |
| Cred | Creditor's Name | | | _ | | | _ |
| Num | nber Street | As of the | date you file, the claim is: Checl | k all that | | | |
| | State ZIF o owes the debt? Check one Debtor 1 only | Code apply. | ngent | van u av | | | |
| | Debtor 2 only | ☐ Disput | ted | | | | |
| | Debtor 1 and Debtor 2 only | Nature of | lien. Check all that apply. | | | | |
| | At least one of the debtors ar | | reement you made (such as m ured car loan) | ortgage | | | |
| | Check if this claim relates to | Statut | ory lien (such as tax lien, mech | nanic's | | | |
| | community debt Date debt was incurred | | nent lien from a lawsuit (including a right to offset) | | | | |
| | | Last 4 di | gits of account number | | | | |
| Ad | d the dollar value of your en | ntries in Column A on | this page. Write that number | here: | 9 | 60.00 | |
| If the | his is the last page of your fore: | orm, add the dollar va | te that number | \$127,73 | 80.00 | | |

| Fill in this information to | identify your ease. | | | | | | |
|--|--|---|--|---|---|----------------------------------|--|
| Debtor 1 | ndentity your case. | | | | | | |
| • | Clifton First Name | Monroe Middle Name | Mitchell Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankrup | tcy Court for the: | | Western District of Texas | | | | |
| Case number (if known) | | | | Check if this amended fi | | | |
| Official Form 1 | 106E/F | | | | | | |
| Schedule E/ | F: Credite | ors Who | Have Unsecu | red Claims | | | 12/15 |
| 106A/B) and on <i>Schedul</i> are listed in <i>Schedule D</i> | le G: Executory Co : Creditors Who Ho tach the Continuat | ntracts and Une old Claims Secu ion Page to this | could result in a claim. Also expired Leases (Official Form red by Property. If more spa page. On the top of any add aims | n 106G). Do not include a ce is needed, copy the F | any creditors with Part you need, fill | n partially sec it out, numbe | ured claims that r the entries in |
| Do any creditors h No. Go to Part Yes. List all of your pric claim listed, identify | 2. prity unsecured cla | ims. If a credito | • | insecured claim. list the c | | , for each clair | |
| fill out the Continua | as possible, list the ation Page of Part 1 | claims in alpha . If more than or | has both priority and nonprior has both priority and nonprior betical order according to the he creditor holds a particular ructions for this form in the in | ity amounts, list that clain creditor's name. If you h claim, list the other credit | n here and show ave more than tw | both priority a | nd nonpriority |
| fill out the Continua | as possible, list the ation Page of Part 1 | claims in alpha . If more than or | nas both priority and nonprior betical order according to the ne creditor holds a particular | ity amounts, list that clain creditor's name. If you h claim, list the other credit | n here and show ave more than two ors in Part 3. | both priority a | nd nonpriority |
| fill out the Continua (For an explanation) 2.1 Internal Revenu Priority Creditor's N | as possible, list the ation Page of Part 1 n of each type of cla ue Service | e claims in alpha . If more than or aim, see the inst | nas both priority and nonprior betical order according to the ne creditor holds a particular | ity amounts, list that clain creditor's name. If you h claim, list the other credit struction booklet.) | n here and show ave more than twors in Part 3. Total I claim a | ooth priority and priority unse | nd nonpriority cured claims, Nonpriority amount |

☐ Yes

Remarks: trust fund penalty assessment taxes; nondischargeable; lien filed in Travis County - no assets in Travis County

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| Debtor 1 | Clifton | Monroe | Mitchell | Case | number (if k | nown) | | |
|--------------------------------|--|--|--|--------------------------|--------------|---------------------|-----------------|--------|
| | First Name | Middle Name | Last Name | | • | , | | |
| Part 1: You | r PRIORITY Uns | ecured Claims - Co | ntinuation Page | | | | | |
| After listing a | any entries on this | page, number them beg | ginning with 2.3, followed by 2.4, and s | so forth. | Total claim | Priority amount | Nonprior amount | ity |
| <u> </u> | I Revenue Service | | Last 4 digits of account number 3 | 3180 | \$167,13 | 2.00 <u>\$167,1</u> | 32.00 | \$0.00 |
| • | reditor's Name I Procedures Staff | - Insolvency | When was the debt incurred? | | | | | |
| City Who ind Det Det Det At le | Street elphia, PA 19101-7: curred the debt? Chotor 1 only otor 2 only otor 1 and Debtor 2 east one of the debt eck if this claim is follaim subject to offse | State ZIP Code neck one. only ors and another or a community debt | As of the date you file, the claim is apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured clair Domestic support obligations Taxes and certain other debts y government Claims for death or personal in were intoxicated Other. Specify | m: you owe the | | | | |
| | ks: 941 taxes; nondi | schargeable | | | | | | |

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| Debt | or 1 | Clifton | Monroe | Mitchell | | Case number (if known) _ | |
|------|--------------------------------------|---------------------|---------------------------|--------------------|------------|--|----------------------------|
| | | First Name | Middle Name | Last Name | | | |
| Dart | 2. List A | II of Your NON | PRIORITY Unsecur | ed Claims | | | |
| ган | Z. LIST A | II OI TOUI NON | FRIORITI Offsecur | ed Claims | _ | | |
| 3. | Do any cred | itors have nonpr | iority unsecured claims | s against you? | | | |
| | No. You | have nothing to | report in this part. Subm | it this form to th | е с | ourt with your other schedules. | |
| | ✓ Yes. | | | | | | |
| | unsecured c 1. If more the | laim, list the cred | itor separately for each | claim. For each | ı cla | of the creditor who holds each claim. If a creditor has main listed, identify what type of claim it is. Do not list claims is in Part 3. If you have more than three nonpriority unsections. | s already included in Part |
| | | | | | | | Total claim |
| 4.1 | Knolle, H | olcomb, Kothma | an & Callahan | | Las | 4 digits of account number | \$86,986.00 |
| | Nonpriority (| Creditor's Name | | | | n was the debt incurred? 2011 | |
| | 7600 N Capital of Texas Hwy Ste B110 | | | | | of the date you file, the claim is: Check all that apply. | |
| | Number | Street | | _ | _ | Contingent | |
| | City | X 78731-1136 | State ZIP Code | | | Unliquidated | |
| | • | red the debt? Ch | | _ | _ | Disputed | |
| | | r 1 only | | 1 | Гур | of NONPRIORITY unsecured claim: | |
| | ☐ Debto | r 2 only | | _ | <u>.</u> . | Student loans | |
| | ☐ Debto | r 1 and Debtor 2 | only | [| | Obligations arising out of a separation agreement or | |
| | ☐ At leas | st one of the debt | ors and another | Г | _ | divorce that you did not report as priority claims | |
| | ☐ Check | if this claim is fo | or a community debt | Ļ | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the clair | n subject to offse | et? | 5 | - 4 | Other. Specify | |
| | √ No | | | | | Attorney Fees | |
| | ☐ Yes | | | | | | |
| 4.2 | R.D. Tips | Inc | | | 26 | 4 digits of account number | \$4,000,000.00 |
| | | Creditor's Name | | | | n was the debt incurred? | |
| | | Military Dr | | | | f the date you file, the claim is: Check all that apply. | |
| | Number | Street | 240 | _ | _ | Contingent | |
| | City | nio, TX 78214-28 | State ZIP Code | | _ | Unliquidated | |
| | • | red the debt? Ch | | | | Disputed | |
| | | r 1 only | iook one. | | | of NONPRIORITY unsecured claim: | |
| | ☐ Debto | r 2 only | | _ | <u>.</u> . | Student loans | |
| | ☐ Debto | r 1 and Debtor 2 | only | Ţ | | Obligations arising out of a separation agreement or | |
| | | st one of the debt | | - | _ | divorce that you did not report as priority claims | |
| | ☐ Check | if this claim is fo | or a community debt | L | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the clair | n subject to offs | et? | 5 | | Other. Specify | |
| | ☑ No | | | | | collection/subrogation | |
| | ☐ Yes | | | | | | |
| | Remarks: | | ner | | | | |

| Debtor | 1 Clifton | Monroe | Mitchell | Case number (if known) | | | | | |
|----------|---|--|---|--|---------------------|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | | |
| Part 2 | Your NONPRIORITY | Unsecured Claims | s - Continuation Page | 2 | | | | | |
| T di t z | Todi Nomi Kroki i | Onsecured ordina | o continuation rag | | | | | | |
| After | listing any entries on this p | page, number them be | ginning with 4.5, follow | with 4.5, followed by 4.6, and so forth. | | | | | |
| | R.D. Tips Inc Nonpriority Creditor's Name 1700 S.E. Military Dr Number Street San Antonio, TX 78214-28 City Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debt Check if this claim is for the claim subject to offset Monoperiority No | State ZIP Code neck one. Only ors and another or a community debt | When wa As of the Cont Unlic Disp Type of I Stud Oblig divor Debt simil | quidated | <u>\$750,000.00</u> | | | | |
| | ☐ Yes | | | | | | | | |
| | Robert Tips | | Last 4 di | gits of account number | <u>unknown</u> | | | | |
| | Nonpriority Creditor's Name | | When wa | When was the debt incurred? | | | | | |
| | c/o R.D. Tips Inc | | As of the | date you file, the claim is: Check all that apply. | | | | | |
| | 1700 S.E. Military Dr Number Street | | Cont | | | | | | |
| | San Antonio, TX 78214 | | ☐ Unlic | uuidated | | | | | |
| _ | City | State ZIP Code | Disp | | | | | | |
| , | Who incurred the debt? Ch | eck one. | | NONPRIORITY unsecured claim: | | | | | |
| | ✓ Debtor 1 only | | | ent loans | | | | | |
| | Debtor 2 only | | _ | | | | | | |
| | Debtor 1 and Debtor 2 of | only | پارغان Javoi | gations arising out of a separation agreement or ce that you did not report as priority claims | | | | | |
| | At least one of the debt | - | ☐ Debt | s to pension or profit-sharing plans, and other ar debts | | | | | |
| | ullet Check if this claim is fo | or a community debt | _ | r. Specify | | | | | |
| | Is the claim subject to offset? ☑ No | — Ouie | Notice Only | | | | | | |
| | ☐ Yes | | | | | | | | |

| Debtor | 1 Clifton | Monroe | Mitchell | Case number (if known) _ | | | | | |
|----------|-------------------------------------|------------------------------|-----------------------|---|----------------|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | | |
| Part 2 | Your NONPRIORITY | Unsecured Claims | s - Continuation F | rage | | | | | |
| | | | | | | | | | |
| After I | isting any entries on this | page, number them be | ginning with 4.5, fol | owed by 4.6, and so forth. | Total claim | | | | |
| 4.5 | South Austin Medical Ce | nter | Last | 4 digits of account number 1928 | \$1,918.00 | | | | |
| | Nonpriority Creditor's Name | | | was the debt incurred? | | | | | |
| _ | PO Box 406176 | | | the date you file, the claim is: Check all that apply. | | | | | |
| | Number Street | | | Contingent | | | | | |
| | Atlanta, GA 30384 | State ZIP Code | | Unliquidated | | | | | |
| | Nho incurred the debt? Ch | | | • | | | | | |
| | Debtor 1 only | icon one. | | Disputed | | | | | |
| _ | Debtor 2 only | | _ | of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 1 and Debtor 2 | only | _ | Student loans | | | | | |
| | _ | • | – (| Obligations arising out of a separation agreement or livorce that you did not report as priority claims | | | | | |
| | At least one of the debt | | | Debts to pension or profit-sharing plans, and other | | | | | |
| | Check if this claim is fo | • | . 9 | imilar debts | | | | | |
| | s the claim subject to offs ☑ No | et? | | Other. Specify | | | | | |
| | | | | nedical | | | | | |
| | Yes | | | | | | | | |
| | Remarks: medical | | | | | | | | |
| | Virginia Jett | | Last | 4 digits of account number | <u>unknown</u> | | | | |
| | Nonpriority Creditor's Name | | Whe | n was the debt incurred? | | | | | |
| _ | 20777 Cordill Ln Number Street | | As of | the date you file, the claim is: Check all that apply. | | | | | |
| | Spicewood, TX 78669-647 | 71 | | Contingent | | | | | |
| <u> </u> | City | State ZIP Code | | Inliquidated | | | | | |
| | Who incurred the debt? Ch | neck one. | | Disputed | | | | | |
| 5 | Debtor 1 only | | Type | of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | | | Student loans | | | | | |
| | Debtor 1 and Debtor 2 | only | | Obligations arising out of a separation agreement or | | | | | |
| | At least one of the debt | ors and another | _ | livorce that you did not report as priority claims | | | | | |
| | Check if this claim is fo | laim is for a community debt | | Debts to pension or profit-sharing plans, and other | | | | | |
| ls | s the claim subject to offs | et? | | imilar debts Other. Specify | | | | | |
| 5 | √ No | | | otner. Specify Iotice Only | | | | | |
| | Yes | | | • | | | | | |

| Debtor 1 | Clifton | | | Mitchell | Case number (if known) |
|--|--|--|---------------------------------|---|--|
| | First Name | Middle Nar | ne | Last Name | |
| Part 3: Li | st Others to Be Notif | ied About | a Debt Tha | nt You Already Listed | |
| collecti agency do not Inter Name Spec 300 | ion agency is trying to co here. Similarly, if you ha have additional persons mal Revenue Service cial Procedures Staff E. 8th Street Stop 5026 A | llect from you we more that to be notified | ou for a debt in one credito | you owe to someone else, list the for any of the debts that you lists in Parts 1 or 2, do not fill out On which entry in Part 1 or Pa | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name Spec 300 Numb | cial Procedures Staff E. 8th Street Stop 5026 A | AUS State | ZIP Code | Line 2.2 of (Check one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name 755 Numb | E. Mulberry Ave 200 | State | ZIP Code | Line 4.2 of (<i>Check one</i>): | rt 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims er |
| Name 755 Numb | E. Mulberry Ave 200 | State | ZIP Code | Line 4.3 of (Check one): | rt 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims er |
| Name Numb | | | | Line of (Check one): | rt 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims er |
| City | | State | ZIP Code | | |

| Debtor 1 | Clifton | Monroe | Mitchell | | | Case number (if | known) |
|---------------|--|---|-----------------------|----------|--------------|-------------------------------------|------------------------------|
| | First Name | Middle Name | Last Name | | | | |
| Part 4: Add t | he Amounts for E | Each Type of Unse | ecured Claim | | | | |
| | nounts of certain type of unsecured clai | | ims. This information | on is fo | r sta | istical reporting purposes only. 28 | U.S.C. §159. Add the amounts |
| | | | | | | Total claim | |
| Total claims | 6a. Domestic sup | port obligations | | 6a. | | \$0.00 | |
| from Part 1 | 6b. Taxes and cer government | owe the | 6b. | | \$318,685.00 | | |
| | 6c. Claims for dea were intoxicat | while you | 6c. | | \$0.00 | | |
| | 6d. Other. Add all Write that amo | other priority unsecur ount here. | ed claims. | 6d. | + | \$0.00 | 1 |
| | 6e. Total. Add line | s 6a through 6d. | | 6e. | | \$318,685.00 | |
| | | | | | | Total claim | |
| | | | | | | Total olaiii | |
| Total claims | 6f. Student loans | | | 6f. | | \$0.00 | |
| from Part 2 | | rising out of a separa divorce that you did ims | | 6g. | | \$0.00 | |
| | 6h. Debts to pens other similar o | ion or profit-sharing debts | plans, and | 6h. | | \$0.00 | |
| | | other nonpriority unse nat amount here. | cured | 6i. | + | \$4,838,904.00 | 1 |
| | 6j. Total. Add lines | s 6f through 6i. | | 6j. | | \$4,838,904.00 | |

| Fill in this informatio | n to identify your case | : | | |
|-------------------------|-------------------------|-------------|---------------------------|--|
| Debtor 1 | Clifton | Monroe | Mitchell | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bank | cruptcy Court for the: | | Western District of Texas | |
| Case number | | | | |
| (if known) | | _ | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or o | company with w | hom you ha | ve the contract or lease | State what the contract or lease is for |
|-----|-------------|----------------|------------|--------------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |
| 2.2 | | | | | |
| | Name | | | | - |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |
| 2.3 | | | | | |
| | Name | | | | - |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |
| 2.4 | | | | | |
| | Name | | | | - |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |

| Fill | in this information | to identify your case | 9: | | |
|---------------|---------------------------------|------------------------------|---|--|--|
| De | ebtor 1 | Clifton First Name | Monroe Middle Name | Mitchell Last Name | |
| | ebtor 2 pouse, if filing) | First Name | Middle Name | Last Name | |
| Un | nited States Bankro | uptcy Court for the: | | lestern District of Texas | |
| | ase number known) | | | | Check if this is an amended filing |
| Off | ficial Form | 106H | | | |
| Sc | hedule F | H: Your Co | debtors | | 12/15 |
| oget n the | ther, both are equ | ally responsible for | supplying correct | information. If more space | as complete and accurate as possible. If two married people are filing ce is needed, copy the Additional Page, fill it out, and number the entries Iditional Pages, write your name and case number (if known). Answer |
| 1. | Do you have ar | ny codebtors? (If yo | u are filing a joint o | ase, do not list either spou | ise as a codebtor.) |
| | □No | | | | |
| | √ Yes | | | | |
| 2. | | | | y property state or territor Texas, Washington, and W | ry? (Community property states and territories include Arizona, California, isconsin.) |
| | ☐ No. Go to lin | | , | ,g, | , |
| | ☑ Yes. Did you | r spouse, former sp | ouse, or legal equi | valent live with you at the ti | ime? |
| | □No | | | • | |
| | ☑ Yes. In w | hich community stat | e or territory did yo | u live? Texas | . Fill in the name and current address of that person. |
| | | Tammy Sue | | | |
| | • | our spouse, former spo | use, or legal equivale | ent | |
| | <u>10722 R</u> Number | iver Plantation Dr Street | | | |
| | Austin, T | X 78747 | | | |
| | City | | State ZIP Code |) | |
| 3. | again as a code | ebtor only if that per | rson is a guaranto | r or cosigner. Make sure y | otor if your spouse is filing with you. List the person shown in line 2 you have listed the creditor on Schedule D (Official Form 106D), Schedule D, Schedule E/F, or Schedule G to fill out Column 2. |
| | Column 1: Your o | odebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | | Check all schedules that apply: |
| 3.1 | Current Electric I | nc | | | Schedule D, line |
| Ш | Name | IIC | | | ✓ Schedule E/F, line 2.2 |
| | 500 Broadway S | | | | |
| | Number Street San Marcos, TX | | | | Schedule G, line |
| | City | State | ZIP Code | | |

Trans Pecos Electric

Street Pecos, TX 79772-8200

State

ZIP Code

Name

2601 W F St

Number

☐ Schedule D, line _

✓ Schedule E/F, line 2.1

☐ Schedule G, line _____

<u>22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32</u>:29 Main Document Pg 47 of 83 Fill in this information to identify your case: Debtor 1 Clifton Mitchell Monroe First Name Middle Name Last Name Debtor 2 (Spouse, if filing) Check if this is: First Name Middle Name Last Name An amended filing United States Bankruptcy Court for the: **Western District of Texas** ☐ A supplement showing postpetition Case number chapter 13 income as of the following date: (if known) MM / DD / YYYY Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ☐ Employed ☑ Not Employed **✓** Employed □ Not Employed If you have more than one job, **Employment status** attach a separate page with information about additional Occupation Owner employers. **Employer's name** He's For Me LLC Include part time, seasonal, or self-employed work. **Employer's address** 10722 River Plantation Dr Occupation may include student Number Street Number Street or homemaker, if it applies. Austin, TX 78747-1481 City State Zip Code State Zip Code 9 years 7 months How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll \$0.00 \$0.00 deductions.) If not paid monthly, calculate what the monthly wage would be.

\$0.00

\$0.00

\$0.00

\$0.00

Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Clifton Monroe

 Clifton
 Monroe
 Mitchell
 Case number (if known) =

 First Name
 Middle Name
 Last Name

| | | | ı | For Debtor 1 | | or Debtor 2 or on-filing spouse | | |
|-----|--|-----------|---------|---------------|----------------|------------------------------------|--------|-------------------------|
| | Copy line 4 here→ | 4. | | \$0.00 | _ | \$0.00 | | |
| 5. | List all payroll deductions: | | | | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | | \$0.00 | _ | \$0.00 | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | | \$0.00 | _ | \$0.00 | | |
| | 5c. Voluntary contributions for retirement plans | 5c. | | \$0.00 | _ | \$0.00 | | |
| | 5d. Required repayments of retirement fund loans | 5d. | | \$0.00 | _ | \$0.00 | | |
| | 5e. Insurance | 5e. | | \$0.00 | _ | \$0.00 | | |
| | 5f. Domestic support obligations | 5f. | | \$0.00 | _ | \$0.00 | | |
| | 5g. Union dues | 5g. | | \$0.00 | _ | \$0.00 | | |
| | 5h. Other deductions. Specify: | 5h. | + | \$0.00 | +_ | \$0.00 | | |
| 6. | Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | | \$0.00 | _ | \$0.00 | | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$0.00 | _ | \$0.00 | | |
| 8. | List all other income regularly received: | | | | | | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | |
| | monthly net income. | 8a. | | \$0.00 | - | \$7,449.00 | | |
| | 8b. Interest and dividends | 8b. | | \$0.00 | _ | \$0.00 | | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$0.00 | _ | \$0.00 | | |
| | 8d. Unemployment compensation | 8d. | | \$0.00 | _ | \$0.00 | | |
| | 8e. Social Security | 8e. | | \$3,820.00 | _ | \$0.00 | | |
| | 8f. Other government assistance that you regularly receive | | | | | | | |
| | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | Specify: | 8f. | | \$0.00 | _ | \$0.00 | | |
| | 8g. Pension or retirement income | 8g. | | \$0.00 | _ | \$0.00 | | |
| | 8h. Other monthly income. Specify: | 8h. | + | \$0.00 | + ₋ | \$0.00 | | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | | \$3.820.00 | <u> </u> | \$7.449.00 |] | |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. | | \$3,820.00 | + | \$7,449.00 |]= | \$11,269.00 |
| 11. | State all other regular contributions to the expenses that you list in Scheo | dule J. | | | | | | |
| | Include contributions from an unmarried partner, members of your househol friends or relatives. | | · | . , | • | | | |
| | Do not include any amounts already included in lines 2-10 or amounts that a Specify: | | | o pay expense | es listet | | . + | \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics | result is | the com | • | income | | - [| \$11,269.00 |
| | | _ | | | | | | Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after you file this form No. ☐ Yes. Explain: | orm? | | | | | | |

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Debtor 1 Clifton Monroe Mitchell Case number (if known) Last Name

First Name Middle Name Last Name

8a. Attached Statement **Business Income - He's For Me LLC** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$32,372.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Ordinary and necessary expense \$11,843.00 \$4,447.00 3. Net Employee Payroll (Other than debtor) Payroll Taxes \$0.00 4. **Unemployment Taxes** \$0.00 \$0.00 Worker's Compensation 6. 7. Other Taxes \$0.00 Inventory Purchases (Including raw materials) \$848.00 8. Purchase of Feed/Fertilizer/Seed/Spray \$50.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$647.00 12. Office Expenses and Supplies \$13.00 13. Repairs and Maintenance \$24.00 14. Vehicle Expenses \$0.00 15. Travel and Entertainment \$2,154.00 16. Equipment Rental and Leases \$0.00 17. Legal/Accounting/Other Professional Fees \$3,892.00 \$0.00 18. Insurance 19. Employee Benefits (e.g., pension, medical, etc.) \$1,005.00 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 21. Other Expenses TOTAL OTHER EXPENSES \$0.00 \$24,923.00 22. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$7,449.00

| | | | | | | İ | | | | |
|----------|--|-----------------------|----------------------|---|--|-------------|---|----------|-----------------------|---------------|
| F | ill in this information | to identify your cas | se: | | | | | | | |
| l | Debtor 1 | Clifton | Monroe | Mitchell | | | | | | |
| ١. | Dahtano | First Name | Middle Name | Last Name | | Check i | t this is: imended filing | , | | |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | I _ | pplement sho | | stpetition | |
| | United States Bankro | uptcy Court for the: | \ | Western District | t of Texas | | oter 13 incom | | | ate: |
| ١, | Case number | | | | | | / DD / YYYY | | | |
| Ľ | (if known) | | | | | | , | | | |
| <u>0</u> | fficial Form | 106J | | | | | | | | |
| S | chedule J | : Your Ex | penses | | | | | | | 12/15 |
| | | | | | ogether, both are equally | | | | | |
| Ė | · | | | top of any addit | tional pages, write your n | ame and ca | ase number (| if known |). Answer ev | ery question. |
| Р | art 1: Describe | Your Household | | | | | | | | |
| 1 | . Is this a joint cas | | | | | | | | | |
| | No. Go to line | | | | | | | | | |
| | ☐ Yes. Does De t | otor 2 live in a sepa | arate household? | | | | | | | |
| | _ | Debtor 2 must file (| Official Form 106.I- | 2. Expenses for | Separate Household of D | ebtor 2 | | | | |
| 2 | . Do you have dep | | ✓ No | _, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Copulate Fredericia et 2 | 0.010 | | | | |
| | Do not list Debtor Debtor 2. | | ☐ Yes. Fill out th | is information | Dependent's relationsh Debtor 1 or Debtor 2 | nip to | Dependent age | | Does depend vith you? | ent live |
| | Do not state the d | lependents' | · | | | | | | □No. □Y | es. |
| | | | | | | | | | □No. □Y | es. |
| | | | | | | | | | □No. □Y | es |
| | | | | | | | | | | |
| | | | | | | | | _ | ∐No. ∐Y | |
| L | | | | | | | | | □ No. □ Y | es. |
| 3 | Do your expense expenses of peop | | √ No □ | | | | | | | |
| L | yourself and you | | □ _{Yes} | | | | | | | |
| Р | Part 2: Estimate | Your Ongoing M | onthly Expense | es | | | | | | |
| | | | | | using this form as a sup | | | | | ises as of a |
| | | | • • | · | eck the box at the top of | tne form ar | id fill in the a | ррисавіє | e date. | |
| | nclude expenses pai uch assistance and | | | | | | | Your ex | penses | |
| 4 | . The rental or hon for the ground or | | enses for your resid | dence. Include f | irst mortgage payments a | nd any rent | 4. | | \$0. | 00 |
| | If not included in | line 4: | | | | | | | | |
| | 4a. Real estate ta | xes | | | | | 4a. | | \$0. | 00 |
| | 4b. Property, hom | neowner's, or renter | 's insurance | | | | 4b. | | \$72. | 00 |
| | 4c. Home mainter | nance, repair, and u | ıpkeep expenses | | | | 4c. | | \$268. | 00_ |
| | 4.1.11 | | ala matinis mandis a | | | | 4d. | | ¢250 | 00 |

4d. Homeowner's association or condominium dues

\$250.00

| | Yo | ur expenses |
|---|----------|--------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| S. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. — | \$160.00 |
| 6b. Water, sewer, garbage collection | 6b | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | | \$54.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| Food and housekeeping supplies | 7. | \$1,700.00 |
| Childcare and children's education costs | 8. | \$0.00 |
| Clothing, laundry, and dry cleaning | 9 | \$188.00 |
| Personal care products and services | 10. | \$250.00 |
| Medical and dental expenses | 11 | \$265.00 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$76.00 |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books | 13 | \$1,272.00 |
| 4. Charitable contributions and religious donations | 14. | \$0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. — | \$1,056.00 |
| 15b. Health insurance | 15b | \$467.00 |
| 15c. Vehicle insurance | 15c | \$53.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$0.00 |
| 7. Installment or lease payments: | | |
| • • | 17a. | \$0.00 |
| 17a. Car payments for Vehicle 1 | 17b. | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17c. | \$487.00 |
| 17c. Other. Specify: storage | 17d. | \$0.00 |
| 17d. Other. Specify: | | ψ0.00 |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$0.00 |
| Other payments you make to support others who do not live with you. | 40 | #0.00 |
| Specify: | 19 | \$0.00 |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income |). | |
| 20a. Mortgages on other property | 20a | \$0.00 |
| 20b. Real estate taxes | 20b | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$0.00 |

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| \$26.00 |
|----------|
| |
| 6,644.00 |
| \$0.00 |
| 6,644.00 |
| |
| |
| 1,269.00 |
| 6,644.00 |
| |
| 4,625.00 |
| |
| |
| |
| |
| |
| |

| Fill in this information | n to identify your case: | | | |
|--------------------------|--------------------------|-------------|---------------------------|--|
| Debtor 1 | Clifton | Monroe | Mitchell | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bank | ruptcy Court for the: | | Vestern District of Texas | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| new Summary and check the box at the top of this page. | |
|---|-----------------------------------|
| Part 1: Summarize Your Assets | |
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 \$165,804.07 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$165,804.07 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$127,730.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$318,685.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$4.838,904.00 |
| Part 3: Summarize Your Income and Expenses | \$5,285,319.00 |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$11,269.00 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$6,644.00 |

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| Debtor 1 | Clifton | Monroe | Mitchell | | Case number (if known | n) |
|-----------------------------|-------------------------|-------------------------------|--|---------------|--|--------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| David A Array | Th O | | ation and Chatiatian Decay | 1_ | | |
| Part 4: Ansv | wer These Ques | tions for Administr | ative and Statistical Record | S | | |
| | | | | | | |
| 6 Are you filin | a for bonkruptov ur | ador Chantors 7 11 or | 122 | | | |
| - | - | nder Chapters 7, 11, or | | . (| and a second of 20th and a second at the annual field of | dod |
| | have nothing to rep | ort on this part of the fo | rm. Check this box and submit this | s form to the | e court with your other sche | dules. |
| √ Yes | | | | | | |
| | | | | | | |
| | | _ | | | | |
| _ | f debt do you have? | | | | | |
| | | | mer debts are those "incurred by ar | | | |
| | r nousenold purpose | e." 11 U.S.C. § 101(8). I | Fill out lines 8-9g for statistical purp | oses. 28 U | I.S.C. § 159. | |
| ☑ Your del | bts are not primarily | y consumer debts. You | have nothing to report on this par | t of the form | n. Check this box and subm | it |
| this form | n to the court with yo | our other schedules. | | | | |
| | | | | | | |
| 0. From the Ct | | | Construction of the control of the c | | Official | |
| | | 122B Line 11; OR , For | Copy your total current monthly in m 122C-1 Line 14 | come nom | Official | |
| 1 01111 1227 | . 2 11, 011, 1 01111 | TEED EINO TT, OIL, TO | 1220 1 20 1 1. | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 0 Convitto fol | llowing appoint acto | acrice of alaims from | Port 4 line 6 of Schodule E/E | | | |
| 9. Copy the loi | nowing special cate | gones of claims from | Part 4, line 6 of Schedule E/F: | | | |
| | | | | | | |
| | | | | | Total claim | |
| | | | | | | _ |
| From Par | t 4 on Schedule E/F | ; copy the following: | | | | |
| | | | | | | |
| 9a. Domes | stic support obligation | ns (Copy line 6a.) | | | | |
| | and duppert dangand | (۵۵۴) ۵۵, | | | | |
| | | | | | | |
| 9b. Taxes a | and certain other de | bts you owe the govern | ment. (Copy line 6b.) | | | |
| | | | | | | |
| | | | | | | |
| 9c. Claims | for death or persona | al injury while you were | intoxicated. (Copy line 6c.) | | | |
| | | | | | | |
| | | | | | | |
| 9d. Studen | it loans. (Copy line 6 | Sf.) | | | | |
| | | | | | | |
| On Ohlimati | | | | | | |
| | (Copy line 6g.) | separation agreement | or divorce that you did not report a | s priority | | |
| ciairis. | (Oopy into og.) | | | | | |
| | | | | | | |
| 9f. Debts to | o pension or profit-sl | haring plans, and other | similar debts. (Copy line 6h.) | | + | |
| | | - - | , | _ | | = |
| | | | | | | |
| 9g. Total . <i>A</i> | Add lines 9a through | n 9f. | | | | |
| | 3 | | | L | - | _ |
| | | | | | | |

| Fill in this information | n to identify your case: | | | | |
|--------------------------|--------------------------|-------------|---------------------------|--|---------------|
| Debtor 1 | Clifton | Monroe | Mitchell | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Banl | cruptcy Court for the: | | Vestern District of Texas | | |
| Case number | | | | | ☐ Check if th |
| (if known) | | | | | amended |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| | |
| Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? |
| ✓No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and that they are true and correct. |
| | |
| | |
| /s/ Clifton Monroe Mitchell | |
| Clifton Monroe Mitchell, Debtor 1 | |
| Date <u>06/30/2022</u> | |
| MM/ DD/ YYYY | |
| | |

| Fill in this information | n to identify your case: | | | |
|--------------------------|--------------------------|-------------|---------------------------|--|
| Debtor 1 | Clifton | Monroe | Mitchell | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bank | ruptcy Court for the: | 1 | Western District of Texas | |
| Case number (if known) | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| What is your curren | t marital status? | | | | |
|------------------------|---------------------------------|----------------------------|-----------------------------|--------------------------|----------------------------|
| Married | | | | | |
| ■ Not married | | | | | |
| During the last 3 year | ars, have you lived anywhei | e other than where you l | ive now? | | |
| ☐ No | | | | | |
| Yes. List all of the | e places you lived in the last | 3 years. Do not include w | here you live now. | | |
| Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| | | | ☐ Same as Debtor 1 | | ☐ Same as Debtor 1 |
| 10306 Broomflower | Dr | _ From 2/2017 | | | From |
| Number Street | | To <u>7/2021</u> | Number Street | | |
| Austin, TX 78739 | | _ | | | _ |
| City | State ZIP Code | _ | City | State ZIP Code | _ |
| | | | ☐ Same as Debtor 1 | | ☐ Same as Debtor 1 |
| | | _ From | | | _ From |
| Number Street | | To | Number Street | | To |
| City | State ZIP Code | _ | City | State ZIP Code | _ |
| | | | | | |
| Within the last 8 yea | ars, did you ever live with a | spouse or legal equivale | nt in a community property | state or territory?(Com | munity property states and |
| ritories include Arizo | ona, California, Idaho, Louisia | ana, Nevada, New Mexico | o, Puerto Rico, Texas, Wash | nington, and Wisconsin.) | |
| No | | | | | |

22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32:29 Main Document Pg 57 of 83 Clifton Mitchell Debtor 1 Monroe Case number (if known) _ First Name Middle Name Last Name Part 2: Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ■ Wages, commissions, Wages, commissions, From January 1 of current year until the bonuses, tips bonuses, tips date you filed for bankruptcy: ✓ Operating a business Operating a business \$20,754.00 ■ Wages, commissions, ■ Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, Operating a business ✓ Operating a business \$164,552.00 ☐ Wages, commissions, ■ Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2020 Operating a business Operating a business YYYY \$62,077.00 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. ✓ Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Gross income from Sources of income **Gross Income from** each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the social security \$7,640.00 date you filed for bankruptcy:

For last calendar year:

(January 1 to December 31, 2021

For the calendar year before that: (January 1 to December 31, 2020

Clifton Debtor 1 Monroe Mitchell Case number (if known) _ First Name Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? **✓** No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? ✓ No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Tyes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage Car Creditor's Name ☐ Credit card Number Street Loan repayment ☐ Suppliers or vendors Other _ City State ZIP Code 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **√**No. Yes. List all payments to an insider. Dates of Amount you still Reason for this payment Total amount paid payment owe Insider's Name Number City ZIP Code

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22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32:29 Main Document Pg 59 of 83 Debtor 1 Clifton Monroe Mitchell Case number (if known). First Name Middle Name Last Name 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√** No Yes. List all payments that benefited an insider. Total amount paid Reason for this payment Dates of Amount you still payment owe Include creditor's name Insider's Name Number Street ZIP Code City State Identify Legal Actions, Repossessions, and Foreclosures Part 4: 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ■No Yes. Fill in the details. Status of the case Nature of the case Court or agency collection Case title R.D. Tips Inc. v Mitchell **✓** Pending 438th District Court Bexar County Court Name On appeal Case number 2015-CI-19661 Bexar County District Clerk Concluded 101 E. Nueva #217 Number Street San Antonio, TX 78205 ZIP Code City collection Case title R.D. Tips Inc. v Mitchell 201st District Court Travis County Pending Court Name On appeal Case number D-1-GN-17-006923 111 Guadalupe **✓** Concluded Number Street Austin, TX 78701 ZIP Code City State appeal of 2015-CI-19661; Judgment Case title R.D. Tips Inc. v Mitchell **✓** Pending 13th Court of Appeals affirmed in apart and reversed in part.

Case number 13-19-00283-CV

Remanded for further proceedings.

Court Name

Street

State

ZIP Code

Number

City

On appeal

Concluded

22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32:29 Main Document Pg 60 of 83 Clifton Debtor 1 Monroe Mitchell Case number (if known) First Name Middle Name Last Name 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name **Explain what happened** Number Street Property was repossessed. Property was foreclosed. Property was garnished. City ZIP Code State Property was attached, seized, or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **✓** No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX-_______ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **✓** No Yes List Certain Gifts and Contributions

✓ No

Yes. Fill in the details for each gift.

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

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| or 1 | Clifton | Monroe | Mitchell | Ca | ase number (if know | (1 |
|--------------------------------------|--|---------------------------|---|-----------------------|--------------------------|---|
| | First Name | Middle Name | Last Name | | _ | |
| Gifts with a per person | total value of more t | than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | |
| erson to Who | om You Gave the Gift | | - | | | |
| | | | | | | |
| | | | - | | | |
| | | | | | | |
| umber St | treet | | | | | |
| | 04-4- | ZIP Code | _ | | | |
| ity | | | | | | |
| erson's rela | ationship to you | | | | d | |
| | | | | | | |
| Within 2 ye | ears before you filed | for bankrupto | y, did you give any gifts or contribution | ns with a total value | of more than \$600 | to any charity? |
| ∕ INo | · | · | | | | , , |
| | n the details for each | gift or contribu | ution. | | | |
| | ntributions to charitie | es Descr | ribe what you contributed | | • | Value |
| that total m | ore than \$600 | | | cor | tributed | |
| | | | | | | |
| harity's Name | e | | | | | |
| | | | | | | |
| | | | | | | |
| umber St | treet | | | | | |
| | | | | | | |
| | State ZIP C | indo | | | | |
| ity | Olate Zii O | oue | | | | |
| City | Oldic Zii O | oue | | | | |
| | | oue | | | | |
| | Certain Losses | oue | | | | |
| t 6: List | Certain Losses | | or since you filed for bankruntcy, did | vou lose anything h | pecause of theft fir | a other disaster or |
| t 6: List | Certain Losses | | or since you filed for bankruptcy, did | ou lose anything k | ecause of theft, fir | e, other disaster, or |
| t 6: List | Certain Losses | | or since you filed for bankruptcy, did y | you lose anything k | ecause of theft, fir | e, other disaster, or |
| Within 1 yenbling? | Certain Losses | | or since you filed for bankruptcy, did | ou lose anything k | ecause of theft, fir | e, other disaster, or |
| Within 1 yenbling? No Yes. Fill in | Certain Losses ear before you filed for n the details. | or bankruptcy | or since you filed for bankruptcy, did y | | | e, other disaster, or Value of property lost |
| Within 1 yenbling? No Yes. Fill in | Certain Losses ear before you filed for the details. | or bankruptcy and Describ | | Date pending | | |
| Within 1 yenbling? No Yes. Fill in | Certain Losses ear before you filed for n the details. | or bankruptcy and Describ | e any insurance coverage for the loss the amount that insurance has paid. List | Date pending | | |

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| □No | | | |
|--|---|--------------------------------------|-------------------------|
| Yes. Fill in the details. | | | |
| L 100.1 iii iii tiio dotailo. | Description and value of any property transferred | Data naviment ar | Amount of payment |
| Law Office of Michael Baumer | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| Person Who Was Paid | Attorney's Fee; Attorney's Fee; Attorney's Fee; Attorney's | -/-/- | 4000.00 |
| PO Box 1818 umber Street | Fee - | 5/5/22 | \$622.00 |
| umber Street | | 5/20/22 | \$500.00 |
| | | 5/26/22 | \$2,500.00 |
| ity State ZIP Code | | 6/1/22 | \$1,000.00 |
| mail or website address | | | |
| Peter Ruggero for the 5/26/22 | | | |
| payment erson Who Made the Payment, if Not You | | | |
| Abacus Credit Counseling | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| erson Who Was Paid | online credit counseling | | |
| 7337 Ventura Blvd #205 | | 5/22 | \$40.00 |
| umber Street | | | |
| Encino, CA 91316 | | | |
| ity State ZIP Code | _ | | |
| mail or website address | _ | | |
| mail of website address | | | |
| | | | |
| erson Who Made the Payment, if Not You | | | |
| erson Who Made the Payment, if Not You | | | |
| Within 1 year before you filed for bar by you deal with your creditors or to n not include any payment or transfer th No | | or transfer any propert | y to anyone who promise |
| Within 1 year before you filed for bar byou deal with your creditors or to not include any payment or transfer the | nake payments to your creditors? | or transfer any propert | y to anyone who promise |
| Within 1 year before you filed for bar byou deal with your creditors or to not include any payment or transfer the | nake payments to your creditors? | Date payment or transfer was made | y to anyone who promiso |
| Within 1 year before you filed for bar by you deal with your creditors or to not include any payment or transfer the No Yes. Fill in the details. | nake payments to your creditors? nat you listed on line 16. | Date payment or | |
| Within 1 year before you filed for bar by you deal with your creditors or to not include any payment or transfer the No Yes. Fill in the details. | nake payments to your creditors? nat you listed on line 16. | Date payment or | |
| Within 1 year before you filed for bar by you deal with your creditors or to not include any payment or transfer the No Yes. Fill in the details. | nake payments to your creditors? nat you listed on line 16. | Date payment or | |
| o you deal with your creditors or to not include any payment or transfer the No Yes. Fill in the details. | nake payments to your creditors? nat you listed on line 16. | Date payment or | |

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| or 1 | Clifton | Monroe | Mitchell | Case number (if know | n) |
|-------------------|----------------------|-------------------------------|------------------------------|--|----------------------------|
| | First Name | Middle Name | Last Name | | |
| | | | | | |
| | | | | ise transfer any property to anyone, other tha | an property transferred ir |
| | | ess or financial affairs | | g of a security interest or mortgage on your p | roporty) |
| | | | ly listed on this statement. | ig of a security interest of mortgage on your pr | operty). |
| 1 No | | | | | |
| _ | | | | | |
| _ Yes. Fil | I in the details. | | | | |
| | | | on and value of property | Describe any property or payments | Date transfer was |
| | | transferre | 9 0 | received or debts paid in exchange | made |
| erson Who | Received Transfer | | | | |
| lumber | Street | | | | |
| | | | | | |
| | | | | | |
| ity | State Z | ZIP Code | | | |
| erson's re | elationship to you _ | | | | |
| | | | | | |
| Yes. Fil | I in the details. | | | | |
| | | Description | on and value of the property | r transferred | Date transfer was made |
| | | | | | |
| lame of tr | ust | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| t 8· lis | t Certain Financ | rial Accounts Inst | ruments Safe Denosit | Boxes, and Storage Units | |
| . O. LIS | t cortain i marie | siai 7.000 di 113, ilia | ramorits, dare beposit | Doxes, and otorage orms | |
| Within 1 | vear before you file | ed for bankruptcy, we | re any financial accounts or | r instruments held in your name, or for your | benefit, closed, sold, mo |
| transferre | ed? | | | | |
| | | ey market, or other financial | | of deposit; shares in banks, credit unions, bro | kerage houses, pension |
| No | | | | | |
| 1 Yes. Fil | I in the details. | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| | First Name | Middle Nar | | tchell st Name | | Case number (if known | , |
|-----------------------------------|---|-----------------------|---|-------------------|-----------------------|--|---|
| | | L | ast 4 digits of a | ccount number | Type of acco | Date account was closed, sold, moved transferred | Last balance d, or before closing of transfer |
| IBC Bank | | | | | | 0/0004 | # 404.00 |
| lame of Finar | incial Institution | Х | XXX- <u>9</u> 9 | 0_1_ | ✓ Checking | 8/2021 | <u>\$184.00</u> |
| PO Box 659 | 9507 | | | | Savings | | |
| umber S | Street | | | | ☐ Money ma | rket | |
| | | | | | Brokerage | | |
| | | | | | _ | | |
| San Antonio | o, TX 78265 | | | | Other — | | |
| City | State Z | IP Code | | | | | |
| Ź No ☑Yes. Fill i | in the details. | | | | | | |
| | | | Who else had a | ccess to it? | Desc | ribe the contents | Do you still hav |
| | | | | | | | □No |
| lame of Finai | incial Institution | N | lame | | | | Yes |
| | | | lumber Street | | | | |
| lumber S | Street | N | diribor ourout | | | | |
| lumber S | Street | | iity | State ZIP Co | de | | |
| lumber S | | | | State ZIP Co | de | | |
| ity | State Z | CIP Code | ity | | | efore you filed for bankruptcy? | |
| ity Have you s | State Z | CIP Code | ity | | | efore you filed for bankruptcy? | |
| ity Have you s | State Z | IP Code | ity ait or place othe | than your home | within 1 year be | efore you filed for bankruptcy? | |
| Have you s | State Z stored property ir | IP Code | ity ait or place othe | | within 1 year be | ribe the contents | Do you still havit? |
| Have you s No ✓ Yes. Fill i | State Z stored property in in the details. | IP Code | ity ait or place othe | than your home | within 1 year be Pesc | ribe the contents | it? |
| Have you s | State Z stored property ir in the details. | IP Code | ity ait or place othe | than your home | within 1 year be | ribe the contents | it? |
| Have you s No Yes. Fill in | State Z stored property ir in the details. e #167 rage Facility | IP Code | ity iit or place other Who else has o | than your home | within 1 year be Pesc | ribe the contents | it? |
| Have you s No Yes. Fill in | State Z stored property ir in the details. e #167 rage Facility | IP Code a storage un | ity iit or place other Who else has o | than your home | within 1 year be Pesc | ribe the contents | it? |
| Have you s No Yes. Fill in | State Z stored property in the details. e #167 age Facility | IP Code a storage un | ity iit or place other Who else has o | than your home | within 1 year be Pesc | ribe the contents | it? |

| | Clifton First Name | Monroe Middle Name | Mitchell Last Name | Case number (if | known) |
|--|---|--|--|---|--------------------------------|
| rt 9: Id | | | ntrol for Someone Else | | |
| Dawe | hald as sautual as | | anna alaa ayyya2 baabada ay | | for on hold in twent for some |
| . Do you √1 No | noid or control an | y property that son | neone eise owns? include an | ny property you borrowed from, are storing | for, or nota in trust for some |
| _ | fill in the details. | | | | |
| 100.1 | iii iii tilo dotallo. | Who | ere is the property? | Describe the property | Value |
| | | VVIIC | ere is the property: | Describe the property | value |
| Owner's N | lame | Numb | per Street | | |
| | | | | | |
| Number | Street | | | | |
| | | City | State ZIP Co | ode | |
| City | State | ZIP Code | | | |
| | | | | | |
| 140 | S. 5 A. | out Environment | | | |
| | sive Betails / tbe | out Environment | | | |
| or utiliz <i>Hazar</i> o pollutar | e it, including dispo dous material mean nt, contaminant, or | osal sites. Is anything an enviro similar term. | onmental law defines as a haz | nental law, whether you now own, operate, or zardous waste, hazardous substance, toxic s | |
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| or utiliz Hazard pollutar Pol | te it, including dispondous material mean ont, contaminant, or notices, releases, and governmental unfill in the details. | Govern | at you know about, regardles you may be liable or potentia ernmental unit er Street | zardous waste, hazardous substance, toxic s ss of when they occurred. ally liable under or in violation of an environ | substance, hazardous material |
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| Covernmental unit Covernmental law, if you know it Date of notice | otor 1 | Clifton | Monroe | Mitchell | | Case number (if kno | wn) |
|--|------------------|------------------------|-------------------------|------------------------------|-----------------------|------------------------------|--|
| Number Street Number Street City State ZIP Code Court or agency Nature of the case Status of the case Status of the case Case title Court Name Court Name Court Name Court Name City State ZIP Code Nature of the case Status of the case Case number City State ZIP Code Case number of a limited family company (LLC) or limited fiability partnership (LLP) A nowner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name of accountant or bookkeeper | | First Name | Middle Name | Last Name | | | |
| Number Street City State ZIP Code Court or agency Nature of the case Status of the case Case title Court Name Pending On appeal Concluded Case number City State ZIP Code Ci | | | Governr | nental unit | Environmenta | l law, if you know it | Date of notice |
| City State ZIP Code Case title Court or agency Nature of the case Status of the case Case title Court Name Court | Name of site | e | Governme | ntal unit | _ | | |
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| Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nature of the case | Number | Street | Number | Street | _ | | |
| Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nature of the case | | | City | State ZIP Code | _ | | |
| Case title | City | State Z | IP Code | | | | |
| Court or agency Nature of the case Court Name City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A partner in a partnership A nomber of a limited liability company (LLC) or limited liability partnership (LLP) A nowner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Dates business existed Randall Williamson, CPA From 122000 To present | | | | | | | |
| Case title Court or agency Nature of the case Court Name Court Name Number Street City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A partner in a partnership A partner in a partnership A nowner of at lieast 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed Randall Williamson, CPA From 12/2000 To present | _ | u been a party in an | y judicial or adminis | trative proceeding unde | er any environmenta | I law? Include settlements a | nd orders. |
| Case title | ☑No | | | | | | |
| Case number Court Name Number Street | Yes. Fil | I in the details. | | | | | |
| Case number Case number City State ZIP Code Concluded | | Court or | agency | Nature of the | case | Status of the case |
| Case number Case number City State ZIP Code Concluded • ••• | | | | | | |
| Number Street City State ZIP Code City State ZIP Code Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. North America Holding Ltd Name 10722 River Plantation Dr Number Street Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | Case title. | | Court Nam | e | _ | | _ |
| Austin. TX 78747-1481 Give Details About Your Business or Connections to Any Business City State ZIP Code Code Cannot Code Code Code Code Code Code Code Code | | | | | | | ' |
| City State ZIP Code **Till:** Give Details About Your Business or Connections to Any Business **Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?* A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. North America Holding Ltd | | | Number | Street | | | Concluded |
| Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. holding company EIN: 7 4 - 2 9 8 2 1 9 7. Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | Case numb | er | | | _ | | |
| Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other full-time or part-time A sole proprietor or self-employed in a trade, profession, or other full-time or part-time A sole profession or part-time A sole profession or other full-time or part-time A sole profession or oth | | | | | | | |
| Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A sole proprietor or self-employed in a trade, profession, or other full-time or part-time A sole proprietor or self-employed in a trade, profession, or other full-time or part-time A sole profession or part-time A sole profession or other full-time or part-time A sole profession or oth | | | | | | | |
| A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ✓ A member of a limited liability company (LLC) or limited liability partnership (LLP) ✓ A partner in a partnership ✓ An officer, director, or managing executive of a corporation ✓ An owner of at least 5% of the voting or equity securities of a corporation ✓ No. None of the above applies. Go to Part 12. ✓ Yes. Check all that apply above and fill in the details below for each business. North America Holding Ltd Name 10722 River Plantation Dr Number Street Dates business existed From 12/2000 To present From 12/2000 To present | rt 11: Gi | ive Details Abou | t Your Business o | or Connections to Ar | ny Business | | |
| A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. North America Holding Ltd Name 10722 River Plantation Dr Number Street Name of accountant or bookkeeper Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | . Within 4 | years before you fi | led for bankruptcy, d | id you own a business | or have any of the fo | llowing connections to any | business? |
| A partner in a partnership ✓ An officer, director, or managing executive of a corporation ✓ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. ✓ Yes. Check all that apply above and fill in the details below for each business. North America Holding Ltd Name 10722 River Plantation Dr Number Street Name of accountant or bookkeeper Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | | | | - | - | | |
| A partner in a partnership A norticer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. North America Holding Ltd Idame Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. holding company EIN: 7 4 - 2 9 8 2 1 9 7 Name of accountant or bookkeeper Dates business existed Randall Williamson, CPA From 12/2000 To present | √ A r | member of a limited | liability company (LL | C) or limited liability part | nership (LLP) | | |
| An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. holding company EIN: 7 4 - 2 9 8 2 1 9 7 Name of accountant or bookkeeper Paustin, TX 78747-1481 Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | _ | | | , | , , , | | |
| An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. holding company EIN: 7 4 - 2 9 8 2 1 9 7 Name of accountant or bookkeeper Austin. TX 78747-1481 Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | | | | of a corporation | | | |
| No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Holding company EIN: 7 4 - 2 9 8 2 1 9 7 Name of accountant or bookkeeper Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | _ | | | | ration | | |
| North America Holding Ltd Name 10722 River Plantation Dr Number Street Name of accountant or bookkeeper Austin. TX 78747-1481 Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: 7 4 - 2 9 8 2 1 9 7 Name of accountant or bookkeeper Pares business existed From 12/2000 To present | | | | | | | |
| North America Holding Ltd Name 10722 River Plantation Dr Number Street Name of accountant or bookkeeper Austin, TX 78747-1481 Do not include Social Security number or ITIN. EIN: 7 4 - 2 9 8 2 1 9 7 Name of accountant or bookkeeper Randall Williamson, CPA From 12/2000 To present | √ Yes. Ch | neck all that apply al | bove and fill in the de | tails below for each busi | ness. | | |
| holding company EIN: 7 4 - 2 9 8 2 1 9 7 Number Street Name of accountant or bookkeeper Austin. TX 78747-1481 Page 12/2000 To present | North Ame | erica Holding Ltd | Describ | e the nature of the busi | ness | | |
| Number Street Name of accountant or bookkeeper Dates business existed Randall Williamson, CPA From 12/2000 To present | Name | | holding | company | | | |
| Name of accountant or bookkeeper Pandall Williamson, CPA Austin, TX 78747-1481 Dates business existed From 12/2000 To present | | | | | | LIN. <u>/ 4 - 2 3 6</u> | <u>. </u> |
| Austin, TX 78747-1481 From <u>12/2000</u> To <u>present</u> | | - | Name o | of accountant or bookke | eper | Dates business existed | |
| AUSIIII. 1 × 76747-1461 | | | Randall | Williamson, CPA | | From 12/2000 To | present |
| | Austin, TX | | IP Code | | | 110m <u>12/2000</u> 10 | <u> prodefit</u> |

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| tor 1 | Clifton | Monroe | Mitchell | Case number (if known) |
|---------------------------|--|----------------------|---|--|
| | First Name | Middle Name | Last Name | |
| <u>Dawa Man</u> Name | nagement LLC | Describ | be the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| 10722 Rive | er Plantation Dr Street | North Ar | merica Holdings General Partner | EIN: <u>7 4 - 2 9 8 2 1 9 7</u> |
| | | Name o | of accountant or bookkeeper | Dates business existed |
| Austin, TX | | Randall IP Code | Williamson, CPA | From <u>12/2000</u> To <u>present</u> |
| | nversiones, Corp | Describ | be the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| | ta 4A, Playa Bonita Street | | erating company | EIN: |
| | | Name o | of accountant or bookkeeper | Dates business existed |
| Arraijan, R City | epublic of Panama, State Zi | | | From To |
| | agement LLC | Describ | be the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| | er Plantation Dr Street | Associa | Responsible Americans Benefits tion, an association formed but never business | r used EIN: 2 6 - 1 3 1 6 6 8 9 |
| | | Name o | of accountant or bookkeeper | Dates business existed |
| | 78747-1481 State Zi | Randall IP Code | Williamson, CPA | From <u>10/2007</u> To <u>present</u> |
| 3. Within 2 yreditors, or | State Zi /ears before you fil other parties. | IP Code | | From 10/2007 To present anyone about your business? Include all financial institution |
| ⊻ Yes. Fill | in the details below | Date is | ssued | |
| Internal Re Name | evenue Service | 3/31/22 MM / DD / | | |
| 400 W Bay Number | / St # 252 Street | | | |
| | | | | |

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Debtor 1 Clifton Mitchell Monroe Case number (if known) -First Name Middle Name Last Name Sign Below Part 12: I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Clifton Monroe Mitchell Signature of Clifton Monroe Mitchell, Debtor 1 Date 06/30/2022 Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **✓** No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? **√**No Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

Yes. Name of person _

| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|---------------------------|--|---------|
| Debtor 1 | Clifton | Monroe | Mitchell | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | | Vestern District of Texas | | |
| Case number (if known) | | | | | Check i |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

| Part 1: Lis | t Your Creditors Who Have Secured Cla | ims | |
|----------------------------------|--|---|--|
| For any c below. | reditors that you listed in Part 1 of Schedule D: | Creditors Who Have Claims Secured by Property (Off | ficial Form 106D), fill in the information |
| Identify t | ne creditor and the property that is collateral | What do you intend to do with the property the a debt? | at secures Did you claim the property as exempt on Schedule C? |
| Creditor's name: | Texas Life Insurance Co | Surrender the property.Retain the property and redeem it. | √ 1 No □ Yes |
| Description property securing of | cription of Texas Life Ins Co whole life policy erty | □ Retain the property and enter into a Reaffirmation Agreement. ☑ Retain the property and [explain]: | 1 163 |

| Debtor 1 | <u>Clifton</u> | Monroe | Mitchell | Case number (if known) |
|-----------------------|--|------------------------|-----------------------------------|---|
| | First Name | Middle Name | Last Name | |
| | | | | |
| Part 2: List | t Your Unexpired | Personal Property | Leases | |
| nformation b | elow. Do not list rea | I estate leases. Unexp | | acts and Unexpired Leases (Official Form 106G), fill in the n effect; the lease period has not yet ended. You may assume an |
| Describe | your unexpired pers | sonal property leases | | Will the lease be assumed? |
| Lessor's na | ame: | | | ☐ No |
| | | | | |
| Descriptior property: | n of leased | | | |
| Lessor's na | ame: | | | ☐ No |
| Description | n of leased | | | ☐ Yes |
| property: | To leased | | | |
| Lessor's na | ame: | | | ☐ No |
| | | | | ☐ Yes |
| Descriptior property: | n of leased | | | |
| Lessor's na | ame: | | | □ No |
| Description | n of leased | | | ☐ Yes |
| property: | 0. 100000 | | | |
| Lessor's na | ame: | | | □ No |
| Description property: | n of leased | | | ☐ Yes |
| Lessor's na | ame: | | | ☐ No |
| Description | o of looped | | | ☐ Yes |
| Descriptior property: | i oi leased | | | |
| Lessor's na | ame: | | | ☐ No |
| Description property: | n of leased | | | ☐ Yes |
| | | | | |
| Part 3: Sig | n Below | | | |
| | | | | |
| | alty of perjury, I declar at is subject to an u | | d my intention about any property | of my estate that secures a debt and any personal |
| X /s/ Clifto | on Monroe Mitchell | | | |
| 70/ Ollito | re of Debtor 1 | | _ | |
| | 5/30/2022 | | | |
| MM | M/ DD/ YYYY | | | |

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|--|--|--|--|-----------|---|
| Fill in this information | n to identify your cas | e: | | | Ç |
| Debtor 1 | Clifton | Monroe | Mitchell | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ | |
| United States Bank | cruptcy Court for the: | v | Vestern District of Texas | | |
| Case number (if known) | | | | | \Box Check if this is an amended filing |
| Official Form | n 122A-1Sup | р | | | |
| Statemen [.] | t of Exemp | — otion from | n Presumption o | f Ab | use Under § 707(b)(2) 12/15 |
| File this supplement oresumption of abus o only one of you, th | together with <i>Chapt</i> se. Be as complete a | er 7 Statement of Y nd accurate as pos uld complete a sepa | our Current Monthly Income (Official) | ficial Fo | rm 122A-1), if you believe that you are exempted from a lether, and any of the exclusions in this statement applies is required by 11 U.S.C. § 707(b)(2)(C). |
| Part 1: Identify | the Kind of Debts | s fou have | | | |
| family, or ho 101). ∑ No. Go | to Form 122A-1; on a supplement with the | lake sure that your the top of page 1 of | answer is consistent with the answer that form, check box 1, <i>There is a</i> | wer you | 8) as "incurred by an individual primarily for a personal, gave at line 16 of the <i>Voluntary Petition</i> (Official Form <i>umption of abuse</i> , and sign Part 3. Then submit |
| Part 2: Determi | ne Whether Milita | ary Service Prov | visions Apply to You | | |
| _ | disabled veteran (as | defined in 38 U.S.C | i. § 3741(1)) ? | | |
| | d you incur debts mo | | on active duty or while you were | performi | ng a homeland defense activity? |
| _ | U.S.C. § 101(d)(1)); | 32 U.S.C. § 901(1) | | | |
| | No. Go to line 3. | | | | |
| | Yes. Go to Form 12 3. Then submi | 22A-1; on the top of it this supplement w | page 1 of that form, check box 1, vith the signed Form 122A-1. | , There i | s no presumption of abuse, and sign Part |
| | - | | of the National Guard? | | |
| | mplete Form 122A-1. | | | | |
| ☐Yes. We | ere you called to activ | re duty or did you pe | erform a homeland defense activit | ty? 10 U | .S.C. § 101(d)(1); 32 U.S.C. § 901(1) |
| □ _{No.} | Complete Form 122A | ۱-1. Do not submit t | his supplement. | | |
| ☐ Yes. | Check any one of th | e following categori | ies that applies: | | |
| | was called to active o | | er 11, 2001, for at least 90 days | | If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and |
| | was called to active o | duty after Septemb | er 11, 2001, for at least 90 days | | sign Part 3. Then submit this supplement with the signed |
| | nd was released from an 540 days before I | | , which is fewer case. | | Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or |
| | am performing a hom | neland defense acti | ivity for at least 90 days. | | are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii). |
| | | | for at least 90 days, ending on | | |
| ba | , wh ankruptcy case. | ich is fewer than 54 | 0 days before I file this | | If your exclusion period ends before your case is closed, you may have to file an amended form later |

| | 22-10/12-tmd Doc#1 | <u> </u> | ")" ⊨ntor | 04 NY13N | 77 10 | <u> 22.20 K</u> | /lain Lio | CUMONE Da 79 | ∆ † 0.3 |
|-------------------|--|---|----------------------------------|-----------------------|-------------------|--------------------|--------------------------|--|--------------------|
| Fill | in this information to identify your case | : | | | | | eck one box m 122A-1S | t only as directed in thi upp: | s form and in |
| D | ebtor 1 Clifton | Monroe | Mitchell | | | | | no presumption of abu | |
| | First Name | Middle Name | Last Name | | | | | | |
| | ebtor 2 | | | | | | | ulation to determine if a | |
| (5 | pouse, if filing) First Name | Middle Name | Last Name | | | | | Calculation (Official F | |
| | nited States Bankruptcy Court for the: | We | estern District | of Texas | | | | ns Test does not apply military service but it c | |
| | known) | | | | | | Check if thi | s is an amended filing | |
| ر | ficial Forms 100 A 1 | | | | | | OHOOK II UII | o io air amonaca iiing | |
| <u>ال</u> | ficial Form 122A-1 | | | | | | | | |
| Ch | napter 7 Statement | t of Your (| Curren | t Mont | hly I | ncome | 9 | | 12/19 |
| nd eca vith | ch a separate sheet to this form. Include case number (if known). If you believe tuse of qualifying military service, conthis form. The contract of the contr | e that you are exem nplete and file <i>Stat</i> e | pted from a p | resumption o | of abuse I | ecause you | ı do not hav | ve primarily consume | r debts or |
| 1. | What is your marital and filing status | ? Check one only. | | | | | | | |
| | Not married. Fill out Column A, line | | | | | | | | |
| | Married and your spouse is filing | | | | 2-11. | | | | |
| | Married and your spouse is NOT f | | | | - L | ad D. Passa | . 44 | | |
| | ☐ Living in the same household ☐ Living separately or are legall | | - | | | | | this box you doclare | |
| | under penalty of perjury that y spouse are living apart for rea | ou and your spouse | e are legally s | eparated und | er nonbar | kruptcy law | that applies | s or that you and your | |
| va | 01(10A). For example, if you are filing our intensity of the incompletion of the incompletion of the incompletion of the intensity of intensi | me for all 6 months | and divide the | total by 6. Fil | II in the re | sult. Do not | include any | income amount more | than once. For |
| | | | | | | Column A Debtor 1 | 4 | Column B Debtor 2 or non-filing spouse | |
| 2. | Your gross wages, salary, tips, bonus deductions). | ses, overtime, and | commissions | (before all pa | yroll | | | | |
| 3. | Alimony and maintenance payments is filled in. | . Do not include pay | ments from a | spouse if Col | umn B | | | | |
| 4. | All amounts from any source which a your dependents, including child sup unmarried partner, members of your h roommates. Include regular contribution to include payments you listed on line | oport. Include regula ousehold, your depons from a spouse of | ar contribution endents, pare | s from an nts, and | | | | | |
| 5. | Net income from operating a busines or farm | s, profession, | Debtor 1 | Debtor 2 | | | | | |
| | Gross receipts (before all deductions) | | | | | | | | |
| | Ordinary and necessary operating exp | enses | | | | | | | |
| | Net monthly income from a business, | profession, or farm | | | Copy here → | | | | |
| 6. | Net income from rental and other rea | l property | Debtor 4 | Debtor 2 | | | | | |
| | Gross receipts (before all deductions) | 11 | Debtor 1 | Debtor 2 | | | | | |
| | Ordinary and necessary operating exp | enses | | | | | | | |
| | Net monthly income from rental or other | | | | Copy | | | | |
| 7 | Interest, dividends, and royalties | | | | → | | | | |

Entered 06/30/22 18:32:29 Main Document Pg 73 of 83 Case number (if known) Pg 73 of 83 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit the Social Security Act. Instead, list it here: For you..... For your spouse..... 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Total current monthly income Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11..... Copy line 11 here Multiply by 12 (the number of months in a year). x 12 12b. The result is your annual income for this part of the form. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare?

Go to Part 3.

Go to Part 3 and fill out Form 122A-2.

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1. There is no presumption of abuse.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.

22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32:29 Main Document Pg 74 of 83 Case number (if known)

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Clifton Monroe Mitchell

Signature of Debtor 1

Date 06/30/2022

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.

 Consumer debts are defined in 11 U.S.C. §
 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Date: June 30, 2022

/s/ Clifton Monroe Mitchell Clifton Monroe Mitchell

| Chapter 7: | Liquid | ation |
|------------|---------------|--------------------|
| | ¢245 | filing fee |
| | \$24 5 | ming ree |
| | \$78 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- most domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form—sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to

discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | ¢212 | total foo |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy*(Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called *ajoint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts /Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

IN THE UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

| IN RE: Mitchell, Clifton Monroe | CASE NO |
|---------------------------------|-----------|
| | CHAPTER 7 |

| | VERIFICATION OF CREDITOR MATRIX | | | |
|---|---------------------------------|-----------|---|--|
| The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge | | | | |
| Date _ | 06/30/2022 | Signature | /s/ Clifton Monroe Mitchell Clifton Monroe Mitchell, Debtor | |

Current Electric Inc 500 Broadway St San Marcos, TX 78666-7749

Internal Revenue Service

Special Procedures Staff - Insolvency PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service

Special Procedures Staff 300 E. 8th Street Stop 5026 AUS Austin, TX 78701

Knolle, Holcomb, Kothman & Callahan 7600 N Capital of Texas Hwy Ste B110 Austin, TX 78731-1136

Jonathan Pauerstein 755 E. Mulberry Ave 200 San Antonio, TX 78212

R.D. Tips Inc 1700 S.E. Military Dr San Antonio, TX 78214-2813

Robert Tips c/o R.D. Tips Inc 1700 S.E. Military Dr San Antonio, TX 78214

South Austin Medical Center PO Box 406176 Atlanta, GA 30384 Texas Life Insurance Co PO Box 830 Waco, TX 76703-0830

Trans Pecos Electric 2601 W F St Pecos, TX 79772-8200

Virginia Jett 20777 Cordill Ln Spicewood, TX 78669-6471

22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32:29 Main Document Pg 82 of 83 IN THE UNITED STATES BANKRUPTCY COURT FOR WESTERN DISTRICT OF TEXAS

FOR WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE:

Clifton Monroe Mitchell

CHAPTER 7

RULE 2016(B) DISCLOSURE OF COMPENSATION FOR ATTORNEY FOR DEBTORS

This sets out our agreement regarding this firm's representation of you in a Chapter 7 bankruptcy case involving issues and/or debts related to a current or prior business to be filed in Austin, Texas.We generally charge a "flat fee" for this type of representation for basic agreed upon services. This fee includes attorney and legal assistant time and routine out of pocket expenses (long distance, copies, postage, faxes).

Total Attorney Fees: \$4,622.00 Total Attorney Fees Paid: \$4,622.00

Balance due: \$0.00

The attorney fee for filing your case will be \$4622, plus the filing fee of \$338 and the debt counseling/personal financial management class fee of \$40, plus any additional amounts set out below. If you choose to do the class over the telephone rather than online, the cost is \$60.

The services included in the flat fee for a business Chapter 7 are:

Pre-filing:

- -initial client meeting
- -homework package meeting(s)
- -signing meeting
- -preparation of petition, schedules of assets and liabilities, and statement of financial affairs
- -responding to creditor calls and correspondence

Post-filing:

- -responding to creditor calls and correspondence
- -attendance at creditors meeting
- -review of security agreements and up to two reaffirmation agreements and attending hearings on the same
- -preparation of and hearings on two motions to avoid non-purchase money liens or judicial liens on homestead and hearings on same
- -preparation of responses to objections to exemptions

Additional fees will be charged for the following:

Pre-filing:

- -credit report (\$30 individual, \$50 joint)
- -excess of 30 creditors (30 70, add \$250; 70 100, add \$500; 100+ we will negotiate a fee)
- -more than \$100,000 in unsecured debt (up to \$150,000, add \$250: more than \$150,000, add \$500; more than \$250,000, we will negotiate a fee)
- -affidavit of special circumstances (\$350)
- -non-filing spouse (\$250)
- -more than four pre-filing meetings, including no shows or rescheduling with less than 48 hours notice (\$200 each)
- -more than 2 two motions to avoid non-purchase money liens or judicial liens on homestead (\$75 each)
- -dropping off your homework package without making an appointment to review it with an attorney (\$200)

Post-filing:

- -motions to sell property (\$400)
- -adding creditors after the initial filing (\$75 for first creditor, \$20 each additional creditor per amendment)
- -amending schedules of exempt assets for assets not listed in homework package (\$150)

22-10413-tmd Doc#1 Filed 06/30/22 Entered 06/30/22 18:32:29 Main Document Pg 83 of 83 -contested motions for relief from stay (\$350 for mortgages; \$250 for vehicles)

- -notice for a reset creditors meeting (\$75)
- -responding to motions to dismiss for failure to file documents or to attend creditors meeting (\$250)
- -responding to motions to dismiss by the U.S. Trustee based on ineligibility to file Chapter 7 (\$400 per hour plus expenses)
- -adversary proceedings (attorney time billed at \$400.00 per hour and legal assistant time billed at \$150.00 per hour; plus expenses)
- -discovery (attorney time billed at \$400.00 per hour and legal assistant time billed at \$150.00 per hour; plus expenses)

In the event that additional fees are charged, those fees will be required to be paid either pre-filing or post-filing, as designated above, unless otherwise agreed.

Our agreement to represent you does not include filing or defending adversary proceedings. In the event an adversary proceeding is filed against you, we will negotiate our representation and fee at that time. (An adversary would generally be a dispute regarding the dischargeability of a particular debt.) Our agreement to represent you in a bankruptcy case also does not constitute an agreement to initiate or defend any litigation on your behalf, whether in bankruptcy court or state court. We do not defend state court collection lawsuits.

Due to reporting errors by creditors and credit reporting agencies, your credit report after filing may not accurately reflect the status of your debts after your bankruptcy discharge. It is the responsibility of your individual creditors to report the status of your debts properly. We cannot guarantee that your creditors will do so. Although we can usually help you correct these problems, we do charge a fee for that service which is not included in the fee for the Chapter 7.

We will provide you with a copy of all of the documents which we file on your behalf in your case at the time they are filed. At the time your discharge is entered, the Court will mail you a copy of the discharge order. These documents are very important. They are the documents a home lender will typically require when you apply for a home loan. Once your case is closed, we send your file to offsite storage. If you request copies of these documents after we send your file offsite, we charge a \$75 fee for retrieval of these documents. In addition, our records are destroyed after 5 years and we may not be able to retrieve copies after that time.

By executing this agreement, you are representing to us that you will pay the agreed upon fee in the agreed upon installments. By executing this agreement you agree that if you fail to make the agreed upon payments of fees, we may cease representation of vou immediately and that you will not oppose a motion to withdraw as your attorneys.

This agreement is not binding until it is signed by both parties and the full retainer is paid. Our offer to represent you expires if you have not executed this engagement letter and paid at least \$700 within 90 days after the date of your consultation. If your case is not filed within 6 months of execution of this agreement, our agreement to represent you expires and we will keep any monies received for services rendered.

The source of compensation was the Debtor(s). The source of compensation to be paid is the Debtor(s). I have not agreed to share the above described compensation with any other person, unless this client(s) was referred to us by the Lawyer Referral Service, in which case we have agreed to a 15% referral fee for all fees received over \$400.00.

June 30, 2022

/s/ Michael Baumer, SB 01931920 Law Office of Michael Baumer PO Box 1818 Liberty Hill, TX 78642

/S/Clifton Monroe Mitchell Clifton Monroe Mitchell